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Fill in this information to identify your case:		FILED
United States Bankruptcy Court for the:		UNITED STATES BANKRUPTCY COURT NORTHERN DISTRICT OF ILLINOIS
Northern District of Illinois		DEC 18 2016
Case number (If known):	Chapter you are filing under:	are to rais
	Chapter 11 Chapter 12	JEFFREY P. ALLSTEADT, CLERK
	Chapter 13	☑ Check if this is an amended filing

Official Form 101

Voluntary Petition for Individuals Filing for Bankruptcy

12/15

The bankruptcy forms use *you* and *Debtor 1* to refer to a debtor filling alone. A married couple may the a newtring specific point case—and in joint cases, these forms use *you* to ask for information from both debtors. For example, if a form asks, "Do you own a car," the answer would be *yes* if either debtor owns a car. When information is needed about the spouses separately, the form uses *Debtor 1* and *Debtor 2* to distinguish between them. In joint cases, one of the spouses must report information as *Debtor 1* and the other as *Debtor 2*. The same person must be Debtor 1 in all of the forms.

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known). Answer every question.

	known). Answer every question to the common of the common	on.	
		About Debtor 1:	About Debtor 2 (Spouse Only in a Joint Case):
	Your full name		- (opodos only il a comt oase).
	Write the name that is on your government-issued picture	Mario	
	identification (for example, your driver's license or	First name	First name
	passport).	Middle name	Middle name
	Bring your picture	Hammond Last name	
	identification to your meeting with the trustee.	Last name	Last name
		Suffix (Sr., Jr., II, III)	Suffix (Sr., Jr., II, III)
łsą.	All other names you	можения в сельствення по	1 + (1 + (1 + (1 + (1 + (1 + (1 + (1 +
	have used in the last 8 years	First name	First name
	Include your married or maiden names.	Middle name	Middle name
		Last name	Last name
		First name	First name
		Middle name	Middle name
		Last name	Last name
isas:	Only the last 4 digits of		
1	our Social Security	$xxx - xx - \underline{5} \underline{4} \underline{6} \underline{2}$	xxx - xx
	number or federal	OR	OR
l	ndividual Taxpayer dentification number ITIN)	9 xx - xx	9 xx - xx

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Debtor 1	Mario First Name Middle	Hammond Name Last Name		Case number (if known)
		Last raille		
A CASAGO ANTAGO A A SAGO A A CASAGO A CASAGO A A CASAGO	ti timat an africa de Alemande, e esperim de productivos, en sienes productivos de presenta por productivos, e	About Debtor 1:	ta timbalikan kalanda katanda kan natanda kan taka kan kan kan natanda kan natanda kan natanda kan natanda kan	About Debtor 2 (Spouse Only in a Joint Case
and E	usiness names mployer ication Numbers you have used in	☑ I have not used any busi	iness names or EINs.	☐ I have not used any business names or EINs
the las	st 8 years	Business name		Business name
	trade names and usiness as names	Business name		Business name
				Duon ess mane
		EIN	- 40040	EIN
		EIN		EIN
5. Where	you live	Titak (China talah di sengah di sengah di sengah sengah sengah pengah pengah pengah pengah sengah sengah sengah		If Debtor 2 lives at a different address:
		720 West 76th Street		
		Number Street		Number Street
		Chicago	IL 60620	
		City	State ZIP Code	City State ZIP Co
		Cook County		County
		If your mailing address is d above, fill it in here. Note th any notices to you at this mai	at the court will send	If Debtor 2's mailing address is different from yours, fill it in here. Note that the court will send any notices to this mailing address.
		Number Street		Number Street
		P.O. Box		P.O. Box
d electropyse en con consum		City	State ZIP Code	City State ZIP Co
Why you	u are choosing trict to file for	Check one:	errett i de de en en et en	Check one:
bankrup		Over the last 180 days bef I have lived in this district I other district.	ore filing this petition, onger than in any	Over the last 180 days before filing this petition I have lived in this district longer than in any other district.
		I have another reason. Exp (See 28 U.S.C. § 1408.)	olain.	☐ I have another reason. Explain. (See 28 U.S.C. § 1408.)

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D	Debtor 1 Mario First Name Middle N	ame	Hammond Last Name	_	Case number (#	known)
1	Part 2: Tell the Court Abo	out Your	Bankruptcy Case			
7.	. The chapter of the	Check	one. (For a brief description o	f each, see <i>Not</i>	ice Required by 1	1 U.S.C. § 342(b) for Individuals Filing
	Bankruptcy Code you are choosing to file		<i>krupicy</i> (Form 2010)). Also, g apter 7	o to the top of p	page 1 and check	the appropriate box.
	under		apter 11			
			•			
			apter 12			
		u Ch	apter 13			
8.	How you will pay the fee	I ne App I ree By I less pay	al court for more details ab rself, you may pay with ca mitting your payment on you a pre-printed address. ed to pay the fee in instablication for Individuals to Figures that my fee be wait aw, a judge may, but is not than 150% of the official the fee in installments). If	out how you r sh, cashier's c our behalf, yo allments. If yo Pay The Filing wed (You may it required to, you choose th	may pay. Typica check, or money ur attorney may bu choose this of Fee in Installment request this opi waive your fee, at applies to you is option, you m	pay with a credit card or check potion, sign and attach the pents (Official Form 103A). tion only if you are filing for Chapter 7. and may do so only if your income is ur family size and you are unable to nust fill out the Application to Have the
9.	Have you filed for bankruptcy within the	☑ No	pter 7 Filing Fee Waived (1035) and the It	with your petition.
	last 8 years?	☐ Yes.	District	When	MM / DD / YYYY	Case number
			District	When	MM / DD / YYYY	Case number
			District	When	WINT LOCATION	Case number
					MM / DD / YYYY	
•						
10.	Are any bankruptcy cases pending or being	☑ No				
	filed by a spouse who is not filing this case with	TYes.	Debtor			Relationship to you
	you, or by a business partner, or by an affiliate?		District	When	MM / DD / YYYY	Case number, if known
			Debtor	***************************************		Relationship to you
					***************************************	Case number, if known
			en e		MM / DD / YYYY	
	Do you rent your residence?	No. Yes.	Go to line 12. Has your landlord obtained a residence?	ın eviction judgr	πent against you ε	and do you want to stay in your
			✓ No. Go to line 12.✓ Yes. Fill out <i>Initial Statem</i> this bankruptcy petition.	nent About an E	viction Judgment	Against You (Form 101A) and file it with

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De	ebtor 1 Mario		Hammond	***************************************	Case nurr	nber (if known)		
	First Name Middle	Name	Last Name					
D.	art 3: Report About Any	. B	V 0 0					
Ρē	Report About Any	Busines	ses You Own as a S	ole Proprie	etor			
12.	Are you a sole proprieto of any full- or part-time		Go to Part 4.					
	business? A sole proprietorship is a	₩ Yes	. Name and location of t	usiness				
	business you operate as an individual, and is not a separate legal entity such as		Name of business, if any	<u> </u>				
	a corporation, partnership, or LLC.		Number Street					
	If you have more than one sole proprietorship, use a separate sheet and attach it		**************************************				VANAMA	
	to this petition.		City		SI	tate ZIP Code		
			Check the appropriate	box to descri	ibe your business:			
			Health Care Busine	ss (as define	ed in 11 U.S.C. § 101	(27A))		
			☐ Single Asset Real E	Estate (as de	fined in 11 U.S.C. § 1	I01(51B))	•	
			Stockbroker (as del	fined in 11 U.	.S.C. § 101(53A))			
			☐ Commodity Broker	(as defined in	n 11 U.S.C. § 101(6)))		
			☐ None of the above					
	Are you filing under Chapter 11 of the Bankruptcy Code and are you a small business debtor?	most re	re filing under Chapter 1 appropriate deadlines. If cent balance sheet, state hese documents do not e	f you indicate ement of ope	e that you are a small erations, cash-flow sta	business debtor, you interment, and federal in	must attach vour	
	For a definition of small	₩ No.	I am not filing under Ch	apter 11.				
	business debtor, see 11 U.S.C. § 101(51D).	☐ No.	I am filing under Chapte the Bankruptcy Code.	er 11, but I ar	m NOT a small busine	ess debtor according to	o the definition in	
		Yes.	I am filing under Chapte Bankruptcy Code.	≆ 11 and I ar	п a small business de	ebtor according to the	definition in the	
en e	rt 4 - Report if You Own							
Ē.	Report if You Own	or Have	Any Hazardous Prop	erty or An	y Property That I	leeds Immediate	Attention	
	Do you own or have any	☑ No						
	property that poses or is alleged to pose a threat	Yes.	What is the hazard?					
- (of imminent and identifiable hazard to public health or safety?			****	THE CONTRACT OF THE CONTRACT O			
(Or do you own any							
	property that needs immediate attention?		If immediate attention i	s needed, wl	hy is it needed?			
į	For example, do you own perishable goods, or livestock that must be fed, or a building that needs urgent repairs?			T-990-00 Birthing A				
			Where is the property?					
			·	Number	Street			

				City		State	ZIP Code	

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Debtor	4	

<u>Mario</u>

Hammond Middle Name

Case number (if known)

Part 5:

Explain Your Efforts to Receive a Briefing About Credit Counseling

15. Tell the court whether you have received a briefing about credit counseling.

> The law requires that you receive a briefing about credit counseling before you file for bankruptcy. You must truthfully check one of the following choices. If you cannot do so, you are not eligible to file.

If you file anyway, the court can dismiss your case, you will lose whatever filing fee you paid, and your creditors can begin collection activities again.

About Debtor 1:

You must check one:

I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, and I received a certificate of completion.

Attach a copy of the certificate and the payment plan, if any, that you developed with the agency.

I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, but I do not have a certificate of completion.

Within 14 days after you file this bankruptcy petition, you MUST file a copy of the certificate and payment plan, if any,

I certify that I asked for credit counseling services from an approved agency, but was unable to obtain those services during the 7 days after I made my request, and exigent circumstances merit a 30-day temporary waiver of the requirement.

To ask for a 30-day temporary waiver of the requirement, attach a separate sheet explaining what efforts you made to obtain the briefing, why you were unable to obtain it before you filed for bankruptcy, and what exigent circumstances required you to file this case.

Your case may be dismissed if the court is dissatisfied with your reasons for not receiving a briefing before you filed for bankruptcy.

If the court is satisfied with your reasons, you must still receive a briefing within 30 days after you file. You must file a certificate from the approved agency, along with a copy of the payment plan you developed, if any. If you do not do so, your case may be dismissed.

Any extension of the 30-day deadline is granted only for cause and is limited to a maximum of 15 days.

l am	not	required	to rece	ive a	briefing	about
		ounselind				

☐ Incapacity. I have a mental illness or a mental deficiency that makes me incapable of realizing or making

rational decisions about finances.

Disability. My physical disability causes me to be unable to participate in a briefing in person, by phone, or through the internet, even after I reasonably tried to do so.

■ Active duty. I am currently on active military duty in a military combat zone.

If you believe you are not required to receive a briefing about credit counseling, you must file a motion for waiver of credit counseling with the court. About Debtor 2 (Spouse Only in a Joint Case):

You must check one:

I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, and I received a certificate of completion.

Attach a copy of the certificate and the payment plan, if any, that you developed with the agency.

i received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, but I do not have a certificate of completion.

Within 14 days after you file this bankruptcy petition. you MUST file a copy of the certificate and payment plan, if any.

I certify that I asked for credit counseling services from an approved agency, but was unable to obtain those services during the 7 days after I made my request, and exigent circumstances merit a 30-day temporary waiver of the requirement.

To ask for a 30-day temporary waiver of the requirement, attach a separate sheet explaining what efforts you made to obtain the briefing, why you were unable to obtain it before you filed for bankruptcy, and what exigent circumstances required you to file this case.

Your case may be dismissed if the court is dissatisfied with your reasons for not receiving a briefing before you filed for bankruptcy.

If the court is satisfied with your reasons, you must still receive a briefing within 30 days after you file. You must file a certificate from the approved agency, along with a copy of the payment plan you developed, if any. If you do not do so, your case may be dismissed.

Any extension of the 30-day deadline is granted only for cause and is limited to a maximum of 15

I am not required to receive a briefing about credit counseling because of:

Incapacity. I have a mental illness or a mental

deficiency that makes me incapable of realizing or making rational decisions about finances.

Disability. My physical disability causes me to be unable to participate in a briefing in person, by phone, or

through the internet, even after I reasonably tried to do so.

Active duty. I am currently on active military duty in a military combat zone.

If you believe you are not required to receive a briefing about credit counseling, you must file a motion for waiver of credit counseling with the court. Case 16-39164 Doc 1 Filed 12/13/16 Entered 12/13/16 11:21:00 Desc Main Document Page 6 of 54

Deb	otor 1 Mario First Name Middle Nar	Hammond Last Name	Case number (# kr	nown)
Pa	rt 6: Answer These Que	stions for Reporting Purpo)ses	
	What kind of debts do you have?	16a. Are your debts prima as "incurred by an individ	arily consumer debts? Consumer del lual primarily for a personal, family, or hou	ots are defined in 11 U.S.C. § 101(8) usehold purpose."
	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	No. Go to line 16b. Yes. Go to line 17.		
			arily business debts? Business debts investment or through the operation of the	
		No. Go to line 16c. Yes. Go to line 17.		
		16c. State the type of debts yo None	ou owe that are not consumer debts or bu	siness debts.
	Are you filing under Chapter 7?	☐ No. I am not filing under (Chapter 7. Go to line 18.	ere uits grown te words het trop to god fan west top stop were either, is seen on de trop en en seen en est en
	Do you estimate that after	Yes. I am filing under Chap	pter 7. Do you estimate that after any exerges are paid that funds will be available to	mpt property is excluded and
	any exempt property is excluded and	☑ No	ses are paid triat railes will be available to	distribute to dissective civators:
	administrative expenses are paid that funds will be	☐ Yes		
	available for distribution to unsecured creditors?			mak Malahudi iligidali yahayakan ka kiri mbamoni o duna oleh yeli kabup yaki Nakape ya mwakapuok
	How many creditors do	2 1-49	1,000-5,000	25,001-50,000
	you estimate that you owe?	☐ 50-99 ☐ 100-199	5,001-10,000 10,001-25,000	50,001-100,000 More than 100,000
	di magami akamata agan manasa nama tan aman ista ka ka ama ya ta ka ka ka ka ka ama ka ka ka ka ka ka ka ka ka	200-999		— more than 100,000
	How much do you	2 \$0-\$50,000	■ \$1,000,001-\$10 million	\$500,000,001-\$1 billion
	estimate your assets to be worth?	\$50,001-\$100,000	\$10,000,001-\$50 million	\$1,000,000,001-\$10 billion
		\$100,001-\$500,000 \$500,001-\$1 million	\$50,000,001-\$100 million \$100,000,001-\$500 million	□ \$10,000,000,001-\$50 billion □ More than \$50 billion
20	How much do you	\$0-\$50,000	\$1,000,001-\$10 million	□ \$500,000,001-\$1 billion
	estimate your liabilities	\$50,001-\$100,000	\$1,000,001-\$10 million	\$1,000,000,001-\$1 billion
•	to be?	\$100,001-\$500,000	\$50,000,001-\$100 million	\$10,000,000,001-\$50 billion
المناطق		□ \$500,001-\$1 million	☐ \$100,000,001-\$500 million	☐ More than \$50 billion
Pai	rt 7: Sign Below		(A)	
Foi	r you	I have examined this petition, a correct.	and I declare under penalty of perjury that	the information provided is true and
			chapter 7, I am aware that I may proceed, I understand the relief available under ea	
			nd I did not pay or agree to pay someone I and read the notice required by 11 U.S.C	
		I request relief in accordance v	with the chapter of title 11, United States C	Code, specified in this petition.
			sult in fines up to \$250,000, or imprisonme	g money or property by fraud in connection ent for up to 20 years, or both.
		* Mario Ma	mond x_	· · · · · · · · · · · · · · · · · · ·
		Signature of Debtor 1	Signatur	e of Debtor 2
		Executed on	Executed	
		MM / DD /	/ YYYY	MM / DD /YYYY

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Debtor 1 Mario Hammond Case number (# known)______

For you if you are filing this bankruptcy without an attorney

If you are represented by an attorney, you do not need to file this page. The law allows you, as an individual, to represent yourself in bankruptcy court, but you should understand that many people find it extremely difficult to represent themselves successfully. Because bankruptcy has long-term financial and legal consequences, you are strongly urged to hire a qualified attorney.

To be successful, you must correctly file and handle your bankruptcy case. The rules are very technical, and a mistake or inaction may affect your rights. For example, your case may be dismissed because you did not file a required document, pay a fee on time, attend a meeting or hearing, or cooperate with the court, case trustee, U.S. trustee, bankruptcy administrator, or audit firm if your case is selected for audit. If that happens, you could lose your right to file another case, or you may lose protections, including the benefit of the automatic stay.

You must list all your property and debts in the schedules that you are required to file with the court. Even if you plan to pay a particular debt outside of your bankruptcy, you must list that debt in your schedules. If you do not list a debt, the debt may not be discharged. If you do not list property or properly claim it as exempt, you may not be able to keep the property. The judge can also deny you a discharge of all your debts if you do something dishonest in your bankruptcy case, such as destroying or hiding property, falsifying records, or lying. Individual bankruptcy cases are randomly audited to determine if debtors have been accurate, truthful, and complete. Bankruptcy fraud is a serious crime; you could be fined and imprisoned.

If you decide to file without an attorney, the court expects you to follow the rules as if you had hired an attorney. The court will not treat you differently because you are filing for yourself. To be successful, you must be familiar with the United States Bankruptcy Code, the Federal Rules of Bankruptcy Procedure, and the local rules of the court in which your case is filed. You must also be familiar with any state exemption laws that apply.

be familiar with any state exemption laws that apply.	
Are you aware that filing for bankruptcy is a serious action consequences? No Yes	on with long-term financial and legal
Are you aware that bankruptcy fraud is a serious crime a inaccurate or incomplete, you could be fined or imprison No Yes	
Did you pay or agree to pay someone who is not an atto No Yes. Name of Person Attach Bankruptcy Petition Preparer's Notice, Decl	
By signing here, I acknowledge that I understand the ris have read and understood this notice, and I am aware the attorney may cause me to lose my rights or property if I	nat filing a bankruptcy case without an
Signature of Debtor 1	Signature of Debtor 2
Date MM / DD / YYYY	Date MM / DD / YYYY
Contact phone (773) 971-4624	Contact phone
Cell phone (773) 971-4624	Cell phone
Email address mariohammond33@gmail.com	Email address

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First Name Middle Name Last Name
DOUSE, if filing) First Name Middle Name Last Name
, , ,
nited States Bankruptcy Court for the: Northern District of Illinois

☐ Check if this is an amended filing

Official Form 106Sum	
Summary of Your Assets and Liabilities and Cert	tain Statistical Information 12/15
Be as complete and accurate as possible. If two married people are filing together, to information. Fill out all of your schedules first; then complete the information on the your original forms, you must fill out a new Summary and check the box at the top of the possible to the second se	is form. If you are filing amended schedules after you file
Part 1: Summarize Your Assets	
	Your assets Value of what you own
1. Schedule A/B: Property (Official Form 106A/B)	¢ 0.00
1a. Copy line 55, Total real estate, from Schedule A/B	\$
	\$ 450.00
1b. Copy line 62, Total personal property, from Schedule A/B	\$ +50.00
1c. Copy line 63, Total of all property on Schedule A/B	\$\$
Part 2: Summarize Your Liabilities	
	Your liabilities Amount you owe
 Schedule D: Creditors Who Have Claims Secured by Property (Official Form 106D) Copy the total you listed in Column A, Amount of claim, at the bottom of the last pa 	age of Part 1 of Schedule D \$ 0.00
 Schedule E/F: Creditors Who Have Unsecured Claims (Official Form 106E/F) 3a. Copy the total claims from Part 1 (priority unsecured claims) from line 6e of Schedule 	ule E/F\$ 600.00
3b. Copy the total claims from Part 2 (nonpriority unsecured claims) from line 6j of Sch	# \$ 10,408.00
	Your total liabilities \$ 10,408.00
Part 3: Summarize Your Income and Expenses	**************************************
4. Schedule I: Your Income (Official Form 106I)	s 1,000.00
Copy your combined monthly income from line 12 of Schedule I	Ψ

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Case number (if known)____

	Answer These Questions for Administrative and Statistical Record	5	
6.	Are you filing for bankruptcy under Chapters 7, 11, or 13?		
	No. You have nothing to report on this part of the form. Check this box and submit this Yes	form to the court with your othe	r schedules.
7.	What kind of debt do you have? Your debts are primarily consumer debts. Consumer debts are those "incurred by all family, or household purpose." 11 U.S.C. § 101(8). Fill out lines 8-9g for statistical purpose.	n individual primarily for a personses 28 H.S.C. & 150	om participativament de caracteria e caracteria e caracteria per especialización per caracteria e caracteria c Omali,
	Your debts are not primarily consumer debts. You have nothing to report on this partities form to the court with your other schedules.	_	nd submit
8.	From the Statement of Your Current Monthly Income: Copy your total current monthly in Form 122A-1 Line 11; OR, Form 122B Line 11; OR, Form 122C-1 Line 14.	ncome from Official	\$ <i>1,000</i>
9.	Copy the following special categories of claims from Part 4, line 6 of Schedule E/F:	a diri-ku-utan menendan susua mengingkan dalam kalam kalam kulun susuan pengangkan dalam sajah kebulan sajah	entra distributivo di sul esta si suo estermininte distributivo en conservazioni deputare de especialmente conc
	From Part 4 on Schedule E/F, copy the following:	Total claim	
	9a. Domestic support obligations (Copy line 6a.)	<u>\$</u>	
	9b. Taxes and certain other debts you owe the government. (Copy line 6b.)	s 600	
	9c. Claims for death or personal injury while you were intoxicated. (Copy line 6c.)	sO	
	9d. Student loans. (Copy line 6f.)	\$	
	9e. Obligations arising out of a separation agreement or divorce that you did not report as priority claims. (Copy line 6g.)	<u>\$</u>	
	9f. Debts to pension or profit-sharing plans, and other similar debts. (Copy line 6h.)	+ \$	
	9g. Total . Add lines 9a through 9f.	s 600	

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Fill in this ir	nformation to identify y	our case:			
Debtor 1	Mario		Hammond		
Debtor 2	First Name	Middle Name	Last Name		
(Spouse, if filing	First Name	Middle Name	Last Name		
	Bankruptcy Court for the: N	orthem District of Illinois			
Case number (if known)					
					Check if this is an amended filing
					ď
Officia	Form 106De	C			
Decl	aration Ab	out an Ind	lividual De	ebtor's Schedules	12/15
If two man	ried people are filing to	gether, both are equally	responsible for supply	ying correct information	
				hedules. Making a false statement, conc	ealing property or
obtaining :	money or property by footh. 18 U.S.C. §§ 152, 1	raud in connection with	a bankruptcy case can	result in fines up to \$250,000, or impriso	onment for up to 20
yours, or 1	oun. 10 0.5.0. gg 152, 1	341, 1519, and 3571.			
	}				
	Sign Below				
	pay or agree to pay so	meone who is NOT an	attorney to help you fill	out bankruptcy forms?	
☑ No □ Yes	. Name of person			Hard Barbarda B. (1)	
	. Hanso or postant			ttach Bankruptcy Petition Preparer's Notice, Decla ignature (Official Form 119).	ration, and
	t va				
Under p	penalty of perjury, I dec	lare that I have read the	summary and schedul	les filed with this declaration and	
tnat tne	y are true and correct.				
	. 41	1			
x //	lacid Ham	-ord s	K		
Signatu	re of Debtor 1		Signature of Debtor 2		
Date 1	2 /3 2016 M/ DD / YYYY		Date		
MI	W/ DD / YYYY		MM / DD / YYYY		

Case 16-39164 Doc 1 Filed 12/13/16 Entered 12/13/16 11:21:00 Desc Main 1 of 54 Fill in this information to identify your case and this tiling: Mario Hammond Debtor 1 First Name l ast Name Debtor 2 (Spouse, if filing) First Name Middle Name United States Bankruptcy Court for the: Northern District of Illinois Check if this is an amended filing Official Form 106A/B Schedule A/B: Property 12/15 in each category, separately list and describe items. List an asset only once. If an asset his in more than one category, has the category where you think it fits best. Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known). Answer every question. Part 1: Describe Each Residence, Building, Land, or Other Real Estate You Own or Have an Interest in 1. Do you own or have any legal or equitable interest in any residence, building, land, or similar property? No. Go to Part 2. Yes. Where is the property? What is the property? Check all that apply. Do not deduct secured claims or exemptions. Put ☐ Single-family home the amount of any secured claims on Schedule D: Creditors Who Have Claims Secured by Property. Duplex or multi-unit building Street address, if available, or other description Condominium or cooperative Current value of the
Current value of the Manufactured or mobile home entire property? portion you own? ☐ Land Investment property ☐ Timeshare Describe the nature of your ownership City State ZIP Code interest (such as fee simple, tenancy by Other, the entireties, or a life estate), if known. Who has an interest in the property? Check one. Debtor 1 only Debtor 2 only County Check if this is community property Debtor 1 and Debtor 2 only (see instructions) At least one of the debtors and another Other information you wish to add about this item, such as local property identification number: If you own or have more than one, list here: What is the property? Check all that apply. Do not deduct secured claims or exemptions. Put ☐ Single-family home the amount of any secured claims on Schedule D: Creditors Who Have Claims Secured by Property. Duplex or multi-unit building Street address, if available, or other description ☐ Condominium or cooperative Current value of the Current value of the Manufactured or mobile home entire property? portion you own? Land Investment property Describe the nature of your ownership ☐ Timeshare City State ZIP Code interest (such as fee simple, tenancy by Other the entireties, or a life estate), if known. Who has an interest in the property? Check one. Debtor 1 only Debtor 2 only County Debtor 1 and Debtor 2 only ☐ Check if this is community property At least one of the debtors and another (see instructions) Other information you wish to add about this item, such as local property identification number:

héar 1	Mario	Document Page 12 of 54 Case number (# 16)		
btor 1	First Name Middle Name Last Name	Case number (# ki	riown)	
		What is the property? Check all that apply.	Do not deduct secured cla	aims or exemptions. Put
		☐ Single-family home	the amount of any secure	d claims on Schedule D:
1.3.	Street address, if available, or other description	Duplex or multi-unit building	Creditors Who Have Clair	
		☐ Condominium or cooperative	Current value of the	Current value of the portion you own?
		Manufactured or mobile home	entire property?	portion you own:
		☐ Land	\$	\$
		☐ Investment property	Describe Abo mature	f.com oumombio
	City State ZIP Code	☐ Timeshare	Describe the nature of interest (such as fee	
		Other	the entireties, or a lif	
		Who has an interest in the property? Check one.		
		Debtor 1 only		
	County	Debtor 2 only	_	
		Debtor 1 and Debtor 2 only	Check if this is co	mmunity property
		At least one of the debtors and another	(see instructions)	
		Other information you wish to add about this ite property identification number:		
t hhΔ	he dollar value of the portion you own for a	ll of your entries from Part 1, including any entries	s for pages	0.0
you I	nave attached for Part 1. Write that number i	nere.	→	
rt 2:	Describe Your Vehicles			
you I own	own, lease, or have legal or equitable interest that someone else drives. If you lease a vehicle	st in any vehicles, whether they are registered or e, also report it on Schedule G: Executory Contracts and the second contracts are reported by the second contracts and the second contracts are reported by the second contracts and the second contracts are reported by the second contract and the second contract are reported by the second contract and the second contract are reported by the second contract are reported by the second contract and the second contract are reported by the second contract are reported by the second contract are reported by the second contract and the second contract are reported by the second con	not? Include any vehicle and Unexpired Leases.	s
you lown Cars	own, lease, or have legal or equitable interest that someone else drives. If you lease a vehicle , vans, trucks, tractors, sport utility vehicles	e, also report it on Schedule G: Executory Contracts	not? Include any vehicle and Unexpired Leases.	s
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Model:Year:	Who has an interest in the property? Check one. ☐ Debtor 1 only ☐ Debtor 2 only	the amount of any sec	ed claims or exemptions. Focured claims on Schedule Claims Secured by Proper
Approximate mileage:	Debtor 1 and Debtor 2 onlyAt least one of the debtors and another	Current value of t entire property?	he Current value of portion you own
Outs anomation.	Check if this is community property (see instructions)	\$0.0	00 \$ 0.
Make:	Who has an interest in the property? Check one.	Do not deduct secure	d claims or exemptions. P
Model:	Debtor 1 only	the amount of any sec	cured claims on Schedule
/par	Debtor 2 only	Creators Who Have C	Jaims Secured by Propert
	Debtor 1 and Debtor 2 only	Current value of th	he Current value of
Approximate mileage:		entire property?	portion you own
Other information:			
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1	Alodel: /ear: Approximate mileage: Other information: raft, aircraft, motor homes, ATVs an	Check if this is community property (see instructions) Make: Model: Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only Approximate mileage: At least one of the debtors and another Check if this is community property (see instructions) Check if this is community property (see instructions) Taft, aircraft, motor homes, ATVs and other recreational vehicles, other vehicles, and accesses: Boats, trailers, motors, personal watercraft, fishing vessels, snowmobiles, motorcycle accesso Who has an interest in the property? Check one.	Check if this is community property (see instructions) Who has an interest in the property? Check one. Do not deduct secure the amount of any set Creditors Who Have (Creditors Who Have

5.

Debtor 1

4.

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Desc Main

Debtor 1

Mario

A Marke Alexander

Last Name

Case number (if known

Part 3: **Describe Your Personal and Household Items** Current value of the Do you own or have any legal or equitable interest in any of the following items? portion you own? Do not deduct secured claims or exemptions. 6. Household goods and furnishings Examples: Major appliances, furniture, linens, china, kitchenware Yes. Describe...... Microwave oven, household furniture, linen, flatware, computer 250.00 7. Electronics Examples: Televisions and radios; audio, video, stereo, and digital equipment; computers, printers, scanners; music collections; electronic devices including cell phones, cameras, media players, games Yes. Describe...... Television, cell phone 100.00 Collectibles of value Examples: Antiques and figurines; paintings, prints, or other artwork; books, pictures, or other art objects; stamp, coin, or baseball card collections; other collections, memorabilia, collectibles ☑ No ☐ Yes. Describe...... 0.00 9. Equipment for sports and hobbies Examples: Sports, photographic, exercise, and other hobby equipment; bicycles, pool tables, golf clubs, skis; canoes and kayaks; carpentry tools; musical instruments Z No Yes. Describe..... 0.00 10. Firearms Examples: Pistols, rifles, shotguns, ammunition, and related equipment No Yes. Describe...... 0.00 11 Clothes Examples: Everyday clothes, furs, leather coats, designer wear, shoes, accessories □ No Yes. Describe..... Everyday Clothes, shoes 100.00 12. Jewelry Examples: Everyday jewelry, costume jewelry, engagement rings, wedding rings, heirloom jewelry, watches, gems, gold, silver ☐ No Yes. Describe...... 0.00 13. Non-farm animals Examples: Dogs, cats, birds, horses 2 No Yes. Describe..... 0.00 14. Any other personal and household items you did not already list, including any health aids you did not list 🛭 No Yes. Give specific 0.00 15. Add the dollar value of all of your entries from Part 3, including any entries for pages you have attached 0.00 for Part 3. Write that number here

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Debtor 1

Mario

First Name

Middle Name

Last Name

Case number (if known)

Part 4: **Describe Your Financial Assets**

Do you own or have a	ny legal or equitable interest in	any of the following?		Current val portion you Do not deduct or exemptions	own? t secured claims
16. Cash <i>Examples</i> : Money yo	ou have in your wallet, in your ho	me, in a safe deposit box, and on hand when you file	e your petition		
☐ No					
☑ Yes		(Cash:	\$	0.00
17. Deposits of money <i>Examples:</i> Checking and other	, savings, or other financial accor similar institutions. If you have n	unts; certificates of deposit; shares in credit unions, nultiple accounts with the same institution, list each.	brokerage houses,		
☑ No	·				
☐ Yes		Institution name:			
	17.1. Checking account:			\$	0.00
	17.2. Checking account:			\$	0.00
	17.3. Savings account:			\$	0.00
	17.4. Savings account:		TATUUM	\$	0.00
	17.5. Certificates of deposit:			\$	0.00
	17.6. Other financial account:	Debit Card		\$	0.00
	17.7. Other financial account:			\$	0.00
	17.8. Other financial account:			•	0.00
	17.9. Other financial account:	THE RESERVE AND ADDRESS OF THE PROPERTY OF THE		\$	0.00
				1	
	, or publicly traded stocks	_			
No Examples: Bond tunds	s, investment accounts with broke	erage firms, money market accounts			
☐ Yes	Institution or issuer name:				
				•	0.00
				\$	0.00
			270000000000000000000000000000000000000	\$	0.00
19. Non-publicly traded : an LLC, partnership,	stock and interests in incorpor	ated and unincorporated businesses, including	an interest in		
☑ No	Name of entity:	٠,٧	of ownership:		
Yes. Give specific	•		% %	\$	0.00
information about them		0	%%	\$	0.00
	· · · · · · · · · · · · · · · · · · ·	0	<u>%</u>	\$	0.00

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Mario Debtor 1 Case number (if known)_ First Name Middle Name 20. Government and corporate bonds and other negotiable and non-negotiable instruments Negotiable instruments include personal checks, cashiers' checks, promissory notes, and money orders. Non-negotiable instruments are those you cannot transfer to someone by signing or delivering them. 2 No ☐ Yes. Give specific Issuer name: information about 0.00 them..... 0.00 0.00 21. Retirement or pension accounts Examples: Interests in IRA, ERISA, Keogh, 401(k), 403(b), thrift savings accounts, or other pension or profit-sharing plans Z No Yes. List each account separately. Type of account: Institution name: 401(k) or similar plan: 0.00 Pension plan: 0.00 IRA: 0.00 Retirement account: 0.00 Keogh: 0.00 Additional account: 0.00 Additional account: 0.00 22. Security deposits and prepayments Your share of all unused deposits you have made so that you may continue service or use from a company Examples: Agreements with landlords, prepaid rent, public utilities (electric, gas, water), telecommunications companies, or others Mo No ☐ Yes..... Institution name or individual: Electric: 0.00 Gas: 0.00 Heating oil: 0.00 Security deposit on rental unit: _ 0.00 Prepaid rent: 0.00 Telephone: 0.00 Water: 0.00 Rented furniture: 0.00 Other: 0.00 23. Annuities (A contract for a periodic payment of money to you, either for life or for a number of years) Z No

-	'es	Issuer name and description:

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Mario Debtor 1

First Name

Document Hammo

Middle Name

Case number (if known)

24. Interests in an education IR.	A, in an account in a qualified AB	LE program, or under a qualified st	ate tuition program	n.	
26 U.S.C. §§ 530(b)(1), 529A	(b), and 529(b)(1).				
Yes					
103	Institution name and description.	Separately file the records of any inter	ests.11 U.S.C. § 52	1(c):	
				\$	0.00
	0.00			- * <u>-</u>	0.00
				_	0.00
			, , , , , , , , , , , , , , , , , , , ,	—	0.00
25. Trusts, equitable or future in exercisable for your benefit	terests in property (other than ar	ything listed in line 1), and rights o	r powers		
2 No		Name of the second seco			
Yes. Give specific					
information about them				\$	0.00
26 Patente conveighte tradem	sulva danda manada and astronomic	** * * *			
Examples: Internet domain na	arks, trade secrets, and other inte mes, websites, proceeds from royal	liectual property			
2 No	, waterday, proceed monitory an	and incertaing agreements			
Yes. Give specific			***************************************		
information about them				\$	0.00
	Control Contro) '	
 Licenses, franchises, and oti Examples: Building permits, ex 	ner general intangibles clusive licenses, cooperative assoc	iation holdings, liquor licenses, profes	sional licenses		
☑ No					
Yes. Give specific information about them				s	0.00
Money or property owed to you?			· ·		nt value of the
				Do not o	leduct secured or exemptions.
28. Tax refunds owed to you				Ciairis	exemptions.
☑ No					
Yes. Give specific informati	3n				
about them, including	whether		Federal:	\$	0.00
you already filed the re and the tax years			State:	\$	0.00
			Local:	\$	0.00
00 Family account					
29. Family support Examples: Past due or lump su	n alimony spousal support child o	upport, maintenance, divorce settleme			
2 No	rr ammony, spousar support, critic st	apport, maintenance, divorce settleme	nt, property settlem	ent	
Yes. Give specific information	ND				
— Total oposito imorridati	// (Alimony:	\$	0.00
		1	Maintenance:	\$	0.00
			Support:	\$	0.00
			Divorce settlement:	\$	0.00
			Property settlement:	\$	0.00
30. Other amounts someone owe	* VOII		-	-	
Examples: Unpaid wages, disab	ility insurance payments, disability i	penefits, sick pay, vacation pay, work	ers' compensation.		
Social Security bene	fits; unpaid loans you made to some	eone else	,		
No	The second secon				
Yes. Give specific information	П				0.00

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Document Hammon

Е Middle Name 31. Interests in insurance policies Examples: Health, disability, or life insurance; health savings account (HSA); credit, homeowner's, or renter's insurance Z No Yes. Name the insurance company Company name: Beneficiary: Surrender or refund value: of each policy and list its value... 0.00 0.00 0.00 32. Any interest in property that is due you from someone who has died If you are the beneficiary of a living trust, expect proceeds from a life insurance policy, or are currently entitled to receive property because someone has died. No No Yes. Give specific information..... 0.00 33. Claims against third parties, whether or not you have filed a lawsuit or made a demand for payment Examples: Accidents, employment disputes, insurance claims, or rights to sue Yes. Describe each claim. 0.00 34. Other contingent and unliquidated claims of every nature, including counterclaims of the debtor and rights to set off claims Z No Yes. Describe each claim. 0.00 35. Any financial assets you did not already list Z No Yes. Give specific information..... 0.00 36. Add the dollar value of all of your entries from Part 4, including any entries for pages you have attached for Part 4. Write that number here 0.00 Describe Any Business-Related Property You Own or Have an Interest In. List any real estate in Part 1. Part 5: 37. Do you own or have any legal or equitable interest in any business-related property? No. Go to Part 6. Yes. Go to line 38. Current value of the portion you own? Do not deduct secured claims or exemptions. 38. Accounts receivable or commissions you already earned 2 No Yes. Describe..... 0.00 39. Office equipment, furnishings, and supplies Examples: Business-related computers, software, moderns, printers, copiers, fax machines, rugs, telephones, desks, chairs, electronic devices ☐ No Yes. Describe.....

Entered 12/13/16 11:21:00 Case 16-39164 Doc 1 Filed 12/13/16 Desc Main Document Hammon Page 19 of 54 Mario Debtor 1 Last Name 40. Machinery, fixtures, equipment, supplies you use in business, and tools of your trade Mo No ☐ Yes. Describe...... 0.00 41. Inventory ☑ No Yes. Describe...... 0.00 42. Interests in partnerships or joint ventures M No Yes. Describe...... Name of entity: % of ownership: 0.00 0.00 0.00 43. Customer lists, mailing lists, or other compilations M No ☐ Yes. Do your lists include personally identifiable information (as defined in 11 U.S.C. § 101(41A))? Yes. Describe..... 0.00 44. Any business-related property you did not already list ₩ No Yes. Give specific information 45. Add the dollar value of all of your entries from Part 5, including any entries for pages you have attached for Part 5. Write that number here 0.00 Describe Any Farm- and Commercial Fishing-Related Property You Own or Have an Interest In. Part 6: If you own or have an interest in farmland, list it in Part 1. 46. Do you own or have any legal or equitable interest in any farm- or commercial fishing-related property? No. Go to Part 7. Yes. Go to line 47. Current value of the portion you own? Do not deduct secured claims or exemptions. 47. Farm animals Examples: Livestock, poultry, farm-raised fish □ No ☐ Yes.....

Page 20 of 54 Mario Debtor 1 First Name Middle Name 48. Crops—either growing or harvested Z No Yes. Give specific information..... 0.00 49. Farm and fishing equipment, implements, machinery, fixtures, and tools of trade Yes..... 0.00 50. Farm and fishing supplies, chemicals, and feed Yes..... 0.00 51. Any farm- and commercial fishing-related property you did not already list Z No Yes. Give specific information..... 0.00 52. Add the dollar value of all of your entries from Part 6, including any entries for pages you have attached 0.00 for Part 6. Write that number here Part 7: Describe All Property You Own or Have an Interest in That You Did Not List Above 53. Do you have other property of any kind you did not already list? Examples: Season tickets, country club membership Z No 0.00 ☐ Yes. Give specific information..... 0.00 0.00 54. Add the dollar value of all of your entries from Part 7. Write that number here 0.00 Part 8: List the Totals of Each Part of this Form 55. Part 1: Total real estate, line 2 0.00 0.00 56. Part 2: Total vehicles, line 5 450.00 57. Part 3: Total personal and household items, line 15 0.00 58 Part 4: Total financial assets, line 36 59. Part 5: Total business-related property, line 45 0.00 0.00 60. Part 6: Total farm- and fishing-related property, line 52 0.00 61. Part 7: Total other property not listed, line 54 450.00 Copy personal property total • +\$ 62. Total personal property. Add lines 56 through 61. 450.00 450.00 63. Total of all property on Schedule A/B. Add line 55 + line 62.

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			Hammond	
r	First Name	Middle Name	Last Name	
ebtor 2				
ouse, if filing) F	First Name	Middle Name	Last Name	
	ankruptcy Court for	the: Northern District of II	linois	_
ase number _ [known)				☐ Check if thi
,			!	amended fi

Schedule C: The Property You Claim as Exempt

12/15

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. Using the property you listed on Schedule A/B: Property (Official Form 106A/B) as your source, list the property that you claim as exempt. If more space is needed, fill out and attach to this page as many copies of Part 2: Additional Page as necessary. On the top of any additional pages, write your name and case number (if known).

For each item of property you claim as exempt, you must specify the amount of the exemption you claim. One way of doing so is to state a specific dollar amount as exempt. Alternatively, you may claim the full fair market value of the property being exempted up to the amount of any applicable statutory limit. Some exemptions—such as those for health aids, rights to receive certain benefits, and tax-exempt retirement funds—may be unlimited in dollar amount. However, if you claim an exemption of 100% of fair market value under a law that limits the exemption to a particular dollar amount and the value of the property is determined to exceed that amount, your exemption would be limited to the applicable statutory amount.

would be limited to the applicable statutory amount. **Identify the Property You Claim as Exempt** 1. Which set of exemptions are you claiming? Check one only, even if your spouse is filling with you. You are claiming state and federal nonbankruptcy exemptions. 11 U.S.C. § 522(b)(3) You are claiming federal exemptions. 11 U.S.C. § 522(b)(2) 2. For any property you list on Schedule A/B that you claim as exempt, fill in the information below. Brief description of the property and line on Current value of the Specific laws that allow exemption Amount of the exemption you claim Schedule A/B that lists this property portion you own Copy the value from Check only one box for each exemption. Schedule A/B Brief Household Furniture 735ILCS5/121001(b) s 150.00 **☑** \$ 150.00 description: 100% of fair market value, up to Line from 6 any applicable statutory limit Schedule A/B: Brief Everyday Clothing 735ILCS5/121001(a)(e) s 100.00 **21** \$ 100.00 description: ☐ 100% of fair market value, up to Line from any applicable statutory limit Schedule A/B: Brief \$100.00 735ILCS5/121001(b) Electronics **2** s 100.00 description: 100% of fair market value, up to Line from any applicable statutory limit Schedule A/B: 3. Are you claiming a homestead exemption of more than \$155,675? (Subject to adjustment on 4/01/16 and every 3 years after that for cases filed on or after the date of adjustment.) Yes. Did you acquire the property covered by the exemption within 1,215 days before you filed this case? No

Official Form 106C

Yes

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Debtor 1

Mario
First Name Middle Name Last Name

Hammond

Case number (if known)_____

Part 2:

Additional Page

Brief descripti on Schedule A	on of the property and line UB that lists this property	Current value of the portion you own	Amount of the exemption you claim	Specific laws that allow exemption
		Copy the value from Schedule A/B	Check only one box for each exemption	
Brief description:	Income Tax Return	\$ <u>5,000.00</u>	<u> </u>	735ILCS5/121001(a)
Line from Schedule A/B:	N/A		√ 100% of fair market value, up to any applicable statutory limit ✓ 100% of fair market value, up to any applicable statutory limit ✓ 100% of fair market value, up to any applicable statutory limit ✓ 100% of fair market value, up to any applicable statutory limit ✓ 100% of fair market value, up to any applicable statutory limit ✓ 100% of fair market value, up to any applicable statutory limit ✓ 100% of fair market value, up to any applicable statutory limit ✓ 100% of fair market value, up to any applicable statutory limit ✓ 100% of fair market value, up to any applicable statutory limit ✓ 100% of fair market value, up to any applicable statutory limit ✓ 100% of fair market value, up to any applicable statutory limit ✓ 100% of fair market value, up to any applicable statutory limit ✓ 100% of fair market value and the fair	· · · · · · · · · · · · · · · · · · ·
Brief description:		\$		
Line from Schedule A/B:			☐ 100% of fair market value, up to any applicable statutory limit	
Brief description:		\$	Q \$	
Line from Schedule A/B:			☐ 100% of fair market value, up to any applicable statutory limit	
Brief description:		\$		
Line from Schedule A/B:			☐ 100% of fair market value, up to any applicable statutory limit	
Brief description:		\$	\$ \$ 100% of fair market value, up to	
Line from Schedule A/B:	THE PARTY OF THE P		any applicable statutory limit	
Brief description:	***************************************	\$		
Line from Schedule A/B:			100% of fair market value, up to any applicable statutory limit	
Brief description:	W-100-100-100-100-100-100-100-100-100-10	\$	0 \$	
Line from Schedule A/B:			100% of fair market value, up to any applicable statutory limit	
Brief description:		\$	\$ \$	
Line from Schedule A/B:			any applicable statutory limit	
Brief description:	THE STATE OF THE S	\$	Q \$	
Line from Schedule A/B:	The state of the s		☐ 100% of fair market value, up to any applicable statutory limit	
Brief description:		\$	D \$	
Line from Schedule A/B:	PROFESSION CONTRACTOR		☐ 100% of fair market value, up to any applicable statutory limit	
Brief description:		\$	\$ \$ 100% of fair market value, up to	
Line from Schedule A/B:			any applicable statutory limit	
Brief description:		\$	D \$	
Line from Schedule A/B:			☐ 100% of fair market value, up to any applicable statutory limit	**************************************

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Fill in this information to identify your ca	ase:			
Maria	Hammond			
First Name Middle	e Name Last Name			
Debtor 2 (Spouse, if filing) First Name Middle	Name Last Name			
United States Bankruptcy Court for the: Norther	n District of Illinois			
Case number			_	
(If known)				if this is an
			amend	led filing
Official Form 106D				
Schedule D: Credito	rs Who Have Claims Secur	ed by Pror	ertv	12/15
	e. If two married people are filing together, both are e			
information. If more space is needed, co	py the Additional Page, fill it out, number the entries,	and attach it to this	form. On the top of	f any
additional pages, write your name and ca	se number (if known).			
1. Do any creditors have claims secured	by your property?			
No. Check this box and submit this fo	rm to the court with your other schedules. You have noth	ng else to report on t	his form.	
Yes. Fill in all of the information below	v.			
Part 1: List All Secured Claims		_		
2. List all secured claims. If a creditor has	more than one secured claim, list the creditor separately	Column A Amount of claim	Column B Value of collateral	Column C Unsecured
for each claim. If more than one creditor	has a particular claim, list the other creditors in Part 2. habetical order according to the creditor's name.	Do not deduct the	that supports this	portion
	madelical order according to the creditor's maine.	value of collateral.	claim	If any
None None	Describe the property that secures the claim:	\$0.00	\$0.00	\$ 0.00
Creditor's Name				
Number Street	•••			
	As of the date you file, the claim is: Check all that apply.	~		
	Contingent	•		
City State ZIP Code	Unliquidated Disputed			
Who owes the debt? Check one	•			
Debtor 1 only	Nature of lien. Check all that apply. An agreement you made (such as mortgage or secured)		•	
Debtor 2 only	car loan)			
Debtor 1 and Debtor 2 only	Statutory lien (such as tax lien, mechanic's lien)			
At least one of the debtors and another	Judgment lien from a lawsuit Other (including a right to offset)			
☐ Check if this claim relates to a	United (including a right to onset)	-		
community debt Date debt was incurred	Last 4 digits of account number			
2.2	entre entre transportation of the entre		Contracted the semantic major to account or comment according to the contract of the contract	gradinja in masanginar as ibandi ingas.
Creditor's Name	Describe the property that secures the claim:	.	\$	\$
Number Street				
	As of the date you file, the claim is: Check all that apply. O Contingent			
	Unliquidated			
City State ZIP Code	Disputed			
Who owes the debt? Check one.	Nature of lien. Check all that apply.			
Debtor 1 only	☐ An agreement you made (such as mortgage or secured			
Debtor 2 only	car loan) Statutory lien (such as tax lien, mechanic's lien)			
Debtor 1 and Debtor 2 only At least one of the debtors and another	Statutory lien (such as tax lien, mechanic's lien) Judgment lien from a lawsuit			
	Other (including a right to offset)			
☐ Check if this claim relates to a community debt				
Date debt was incurred	Last 4 digits of account number			
Add the dollar value of your entries in	Column A on this page. Write that number here:	s0.00 l	and a find the country of the and the find the distribution of the finding of the finding of the finding of the	to be to the construction of the property of the state of

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Mario

Debtor 1

Additional Page After listing any entries on to by 2.4, and so forth.	his page, number them beginning with 2.3, followed	Column A Amount of claim Do not deduct the value of collateral.	Column B Value of collateral that supports this claim	Column C Unsecured portion If any
Creditor's Name	Describe the property that secures the claim:	\$	\$	\$
Number Street				
	As of the date you file, the claim is: Check all that apply.	<u>.i</u>		
	Contingent			
City State ZIP Cod	Unliquidated Disputed			
Who owes the debt? Check one.	Nature of lien. Check all that apply.			
Debtor 1 only	An agreement you made (such as mortgage or secured)			
Debtor 2 only	car loan)			
Debtor 1 and Debtor 2 only	Statutory lien (such as tax lien, mechanic's lien)			
At least one of the debtors and another	Judgment lien from a lawsuit			
Check if this claim relates to a community debt	Other (including a right to offset)			
Date debt was incurred	Last 4 digits of account number			
en en en fat den fat de en de tente en		et tratification and anticontraction to produce the tratification of the state of the section of	artenantigat kina da daman ar ar tahun ara ara ara ara ara ga ara Sandanada ara ara ara ga da maga sa a	han sang nanan ana ay as sa sa da sang sa sa sa sa
Creditor's Name	Describe the property that secures the claim:	\$	\$\$	
Number Street	6 1 2 1 1 2 1 2 1 2 1 2 1 2 1 2 1 2 1 2			
	As of the date you file, the claim is: Check all that apply.			
	Contingent			
City State ZIP Code	Unliquidated			
Who owes the debt? Check one.	Disputed			
	Nature of lien. Check all that apply.			
Debtor 1 only Debtor 2 only	An agreement you made (such as mortgage or secured			
Debtor 2 only Debtor 1 and Debtor 2 only	car loan)			
At least one of the debtors and another	Statutory lien (such as tax lien, mechanic's lien) Judgment lien from a lawsuit			
	Judgment lien from a lawsuit Other (including a right to offset)			
Check if this claim relates to a community debt	Other (including a right to onset)			
Date debt was incurred	Last 4 digits of account number			
The property of the second decimal and the property of the pro	Describe the property that secures the claim:	s Commission of the Commission of Section 1997 of the Commission o	delition and firm from some over a consecutive spin consecutive spin programming spin electric	14.74.14.14.14.14.14.14.14.14.14.14.14.14.14
Creditor's Name		i	\$\$	

Number Street				
***************************************	As of the date you file, the claim is: Check all that apply.			
	Contingent			
City State ZIP Code	Unliquidated			
	☐ Disputed			
Vho owes the debt? Check one.	Nature of lien. Check all that apply.			
Debtor 1 only	An agreement you made (such as mortgage or secured)			
Debtor 2 only	car loan)			
Debtor 1 and Debtor 2 only	Statutory lien (such as tax lien, mechanic's lien)			
At least one of the debtors and another	Judgment lien from a lawsuit			
Check if this claim relates to a community debt	Other (including a right to offset)			
ate debt was incurred	Last 4 digits of account number			

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Dahtar	4	

Hammond Mario Case number (if known)_

Pa	rt 2: L	ist Others to Be	Notified for a Debt T	hat You Aiready	Listed
age	ency is tryical tryical in the control of the contr	ng to collect from yo e than one creditor t	us for a dobt you awa to s	omeone else, list the ou listed in Part 1, lis	debt that you already listed in Part 1. For example, if a collection ecreditor in Part 1, and then list the collection agency here. Similarly, if st the additional creditors here. If you do not have additional persons to
					On which line in Part 1 did you enter the creditor?
	Name				Last 4 digits of account number
	Number	Street		<u> </u>	
	City		State	ZIP Code	
					On which line in Part 1 did you enter the creditor?
	Name				Last 4 digits of account number
	Number	Street		<u></u>	
			LANCE CONTRACTOR OF THE PARTY O		
	City		State	ZIP Code	•
					On which line in Part 1 did you enter the creditor?
1	Name				Last 4 digits of account number
	Number	Street			•
	Oh.		State	ZIP Code	
	City				On which line in Part 1 did you enter the creditor?
	Name				Last 4 digits of account number
				·····	-
	Number	Street			
	****				_
	City		State	ZIP Code	
	Nome				On which line in Part 1 did you enter the creditor? Last 4 digits of account number
	Name				_
	Number	Street			
					-
	City		State	ZIP Code	-
					On which line in Part 1 did you enter the creditor?
	Name				Last 4 digits of account number
	Number	Street			-
					_
	City		State	ZIP Code	_

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Call in	this in	formation to ident	ifu your caso:	Document Page 2	0 01 54	
Zaman.	tino m	normation to ident	ny your case.		4	
Debtor	1 .	Mario First Name	Acida Nove	Hammond Last Name		
Debtor	. 9	r ist Name	Middle Name	i,asi Name		
		First Name	Middle Name	Last Name		
United	States i	Bankruptcy Court for th	ne: Northern District	of Illinois		
Case n	umher					Check if this is an
(If know						amended filing
~ ~~		400=1				
Offic	iai r	orm 106E/	<u> </u>			
Sch	edi	ule E/F: C	reditors V	Vho Have Unsec	ured Claims	12/15
List the A/B: Pro- creditor needed any add	other operty rs with , copy ditiona	party to any exect (Official Form 106 partially secured the Part you need I pages, write you	utory contracts or a A/B) and on Scheo claims that are list , fill it out, number r name and case no	umber (if known).	It in a claim. Also list exec Unexpired Leases (Official Have Claims Secured by F	utory contracts on <i>Schedule</i> Form 106G). Do not include any
Part 1	Lis	st All of Your PR	ilORITY Unsecui	red Claims		
_	_	•	ty unsecured claim	s against you?		
_		to Part 2.				
	Yes.		aumad alaimaa lfa a	roditor has more than one priority.	unanturad alaim. list the gradi	tor conceptable for each plain. For
eacl non	h claim priority	listed, identify what amounts. As much	type of claim it is. It as possible, list the	reditor has more than one priority u f a claim has both priority and nonp claims in alphabetical order accord f Part 1. If more than one creditor h	riority amounts, list that claim ling to the creditor's name. If	here and show both priority and you have more than two priority
(For	an exp	planation of each ty	pe of claim, see the	instructions for this form in the instr	The second secon	erin der gerichte der Arte der Gereiche der Arte der Gereiche der Gere
					Total	claim Priority Nonpriority amount amount
2.1			_			
ir		al Revenue Serv litor's Name	rice	Last 4 digits of account number	r <u>5 4 6 2</u> \$	600.00 \$ 600.00 \$ 0.00
	•	epartment of the	e Treasury	When was the debt incurred?		
Nu	mber	Street				
K	ansas	s City	MO 64999	As of the date you file, the clain	n is: Check all that apply.	
City			tate ZIP Code	Contingent		
W	ho incu	rred the debt? Chec	ck one.	Unliquidated		
		1 only		☐ Disputed		
	Debtor			Type of PRIORITY unsecured	claim:	
		1 and Debtor 2 only		Domestic support obligations		
	At leas	t one of the debtors ar	nd another	Taxes and certain other debts y	ou owe the government	
	Check	cif this claim is for	a community debt	Claims for death or personal inju	~	
is	the cla	im subject to offset	?	intoxicated		
	No	-		Other. Specify		
0	Yes	antitude summer televistes summer televistes and televistes and televistes and televistes and televistes and t			miliony o dimo acoministi o governisti disconti carany, etimpo tro mpo cili mipo e dimonen ilamo e	takan katang matipaj at palamingan dan kanandi, ataun katanan pinganat, ay an tahan kanandi an taha tapat.
.2				Last 4 digits of account number	· •	\$\$
Pric	ority Cred	litor's Name		When was the debt incurred?		 -
Nin	mber	Street	 	THE HEAD CONTROL TO SERVICE STATE OF THE SERVICE ST		
140	Mibel	Succe		As of the date you file, the claim	is: Check all that apply.	
				Contingent		
City	7	S	tate ZIP Code	Unliquidated		
W	ho incu	irred the debt? Chec	k one.	☐ Disputed		
	Debtor	•		Type of PRIORITY unsecured	claim:	
	Debtor			Domestic support obligations	wromat FPs	
		1 and Debtor 2 only		Taxes and certain other debts y	ou owe the government	
		t one of the debtors ar		Claims for death or personal inju	-	
	Check	if this claim is for a	a community debt	intoxicated		
		im subject to offset	?	Other. Specify		
	No					
u	Yes					

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First Name Middle Name Last Name L

Debtor 1

Your PRIORITY Unsecured Claims — Continuation Page Part 1:

fter listing any entries on this page, number the	m beginning with 2.3, followed by 2.4, and so forth.	Total claim	Priority amount	Nonpriority amount
	Last 4 digits of account number	\$	\$	\$
Priority Creditor's Name	Total Makela day Transit			
Number Street	When was the debt incurred?			
	As of the date you file, the claim is: Check all that apply.			
	Contingent			
City State ZIP Code	Unliquidated			
	☐ Disputed			
Who incurred the debt? Check one.				
Debtor 1 only	Type of PRIORITY unsecured claim:			
Debtor 2 only	☐ Domestic support obligations			
Debtor 1 and Debtor 2 only	Taxes and certain other debts you owe the government			
☐ At least one of the debtors and another☐ Check if this claim is for a community debt	Claims for death or personal injury while you were intoxicated			
- Those is the claim is for a community dept	Other. Specify			
Is the claim subject to offset?				
☐ No ☐ Yes	kita manananananananananan kita mananananan mananan mananan kananan kananan kanan kanan kanan kanan kanan kana			
<u></u>	Last 4 digits of account number	\$		
Priority Creditor's Name				<u> </u>
Number Street	When was the debt incurred?			
Number Street				
	As of the date you file, the claim is: Check all that apply.			
	Contingent			
City State ZIP Code	Unliquidated			
Who incurred the debt? Check one.	☐ Disputed			
	Towns of ODIODITY			
Debtor 1 only Debtor 2 only	Type of PRIORITY unsecured claim:			
Debtor 1 and Debtor 2 only	Domestic support obligations			
At least one of the debtors and another	Taxes and certain other debts you owe the government			
	 Claims for death or personal injury while you were intoxicated 			
☐ Check if this claim is for a community debt	Other. Specify			
Is the claim subject to offset?	- Otto: Optony			
□ No				
☐ No ☐ Yes				
		raka generak dibiban barakar di arakar sarakar sara genganyang gengan	gangan ayang gapanan samuna ta Sirinda ta sami'na 19 kad	
Priority Creditor's Name	Last 4 digits of account number	\$	\$	\$
•	When was the debt incurred?			
Number Street	when was die debt nouried?			
	As of the date you file, the claim is: Check all that apply.			
	☐ Contingent			
City State ZIP Code	Unliquidated			
Who incurred the debt? Check one.	☐ Disputed			
Debtor 1 only	Type of PRIORITY unsecured claim:			
Debtor 2 only				
Debtor 1 and Debtor 2 only	Domestic support obligations			
At least one of the debtors and another	Taxes and certain other debts you owe the government Claims for death or personal injury while you were			
☐ Check if this claim is for a community debt	intoxicated Other. Specify	t en	el Pett i est ett till till ekkel velståd velstredgend den tredjert f	ing personal services and services and services of the service
Is the claim subject to offset?				
□ No				
☐ Yes				

Case 16-39164 Doc 1 Filed 12/13/16 Entered 12/13/16 11:21:00 Desc Main Documentond Page 28 of 54 Debtor 1 Part 2: List All of Your NONPRIORITY Unsecured Claims 3. Do any creditors have nonpriority unsecured claims against you? No. You have nothing to report in this part. Submit this form to the court with your other schedules. 4. List all of your nonpriority unsecured claims in the alphabetical order of the creditor who holds each claim. If a creditor has more than one nonpriority unsecured claim, list the creditor separately for each claim. For each claim listed, identify what type of claim it is. Do not list claims already included in Part 1. If more than one creditor holds a particular claim, list the other creditors in Part 3.If you have more than three nonpriority unsecured claims fill out the Continuation Page of Part 2. Total claim City of Chicago Last 4 digits of account number 5 4 6 2 8.000.00 Nonpriority Creditor's Name When was the debt incurred? 121 North LaSalle Chicago IL 60606 City As of the date you file, the claim is: Check all that apply. ☑ Contingent Who incurred the debt? Check one. ☐ Unliquidated Debtor 1 only Disputed Debtor 2 only Debtor 1 and Debtor 2 only Type of NONPRIORITY unsecured claim: At least one of the debtors and another ☐ Student loans Obligations arising out of a separation agreement or divorce Check if this claim is for a community debt that you did not report as priority claims Is the claim subject to offset? Debts to pension or profit-sharing plans, and other similar debts Mo No Other. Specify Parking Tickets Yes 363.00 **AFNI** Last 4 digits of account number Nonpriority Creditor's Name When was the debt incurred? PO Box 3097 Number As of the date you file, the claim is: Check all that apply. Bloomington IL 61702 State ZIP Code Contingent Unliquidated Who incurred the debt? Check one. Disputed Debtor 1 only Debtor 2 only Type of NONPRIORITY unsecured claim: Debtor 1 and Debtor 2 only At least one of the debtors and another □ Student loans Obligations arising out of a separation agreement or divorce Check if this claim is for a community debt that you did not report as priority claims Debts to pension or profit-sharing plans, and other similar debts Is the claim subject to offset? Other, Specify Collection-Comcast V No ☐ Yes US Cellular/ C/O Debt Recovery Solutions Last 4 digits of account number 555.00 Nonpriority Creditor's Name When was the debt incurred? PO Box 1259 Number Oaks, PA 19456 As of the date you file, the claim is: Check all that apply. State ZIP Code **Contingent** Who incurred the debt? Check one. Unliquidated Debtor 1 only Disputed Debtor 2 only Debtor 1 and Debtor 2 only Type of NONPRIORITY unsecured claim: At least one of the debtors and another ☐ Student loans Check if this claim is for a community debt Obligations arising out of a separation agreement or divorce that you did not report as priority claims Is the claim subject to offset? Debts to pension or profit-sharing plans, and other similar debts ☑ No Other. Specify <u>Cellular Bill</u> Yes

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First Name Natida Name Last Nam

Debtor 1

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Your NONPRIORITY Unsecured Claims — Continuation Page

After li	sting any entries on this page, number the	m beginning with	1 4.4, followed by 4.5, and so forth.	Total claim
	ledical Business Bureau		Last 4 digits of account number	\$ 900.00
	npriority Creditor's Name 460 Renaissance Drive Suite 400		When was the debt incurred?	
	mber Street ark Ridge IL	60068	As of the date you file, the claim is: Check all that apply.	
Cit		ZIP Code	Contingent Unliquidated Disputed	
	Debtor 1 only Debtor 2 only		Type of NONPRIORITY unsecured claim:	
	Debtor 1 and Debtor 2 only		☐ Student loans	
	At least one of the debtors and another		Obligations arising out of a separation agreement or divorce that you did not report as priority claims	
ls M	Check if this claim is for a community debt the claim subject to offset? No Yes		Debts to pension or profit-sharing plans, and other similar debts Other. Specify Medical Bills	
.5 N	orthwest Collectors		Last 4 digits of account number	\$ 590.00
No	priority Creditor's Name 6601 Algonquin Road Suite 233		When was the debt incurred?	
	mber Street		-	
R	olling Meadows IL	60008	As of the date you file, the claim is: Check all that apply.	
City	State	ZIP Code	Contingent	
w	no incurred the debt? Check one.		Unliquidated	
			☐ Disputed	
	Debtor 1 only Debtor 2 only		Time of NONDRIODITY are a sund disimi	
	Debtor 1 and Debtor 2 only		Type of NONPRIORITY unsecured claim:	
	At least one of the debtors and another	•	Student loans	
			 Obligations arising out of a separation agreement or divorce that you did not report as priority claims 	
u	Check if this claim is for a community debt		Debts to pension or profit-sharing plans, and other similar debts	
	the claim subject to offset?		Other, Specify Medical Bill	
	No Yes			ì
	er e	e e e e e e e e e e e e e e e e e e e	Last 4 digits of account number	\$
Non	priority Creditor's Name		Last 4 digits of account number When was the debt incurred?	
Nun	nber Street		As of the date you file, the claim is: Check all that apply.	
Cit		7/0 4		
City	State	ZIP Code	☐ Contingent ☐ Unliquidated	
Wh	o incurred the debt? Check one.		☐ Unliquidated ☐ Disputed	
	Debtor 1 only		- Cobates	
	Debtor 2 only		Type of NONPRIORITY unsecured claim:	
	Debtor 1 and Debtor 2 only		☐ Student loans	
	At least one of the debtors and another		Obligations arising out of a separation agreement or divorce that	
	Check if this claim is for a community debt		you did not report as priority claims	
	•		Debts to pension or profit-sharing plans, and other similar debts	
	he claim subject to offset?		Other. Specify	
	No Vos			
3 8				

Debtor 1

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First Name Middle Name	Las	Document Document	age 30 of 54e number (if known)		

Part 3:

List Others to Be Notified About a Debt That You Already Listed

you for a debt you owe to someone else, list the original creditor in Parts 1 or we more than one creditor for any of the debts that you listed in Parts 1 or 2, list the sons to be notified for any debts in Parts 1 or 2, do not fill out or submit this page.
On which entry in Part 1 or Part 2 did you list the original creditor?
Line of (Check one): Part 1: Creditors with Priority Unsecured Claims
Part 2: Creditors with Nonpriority Unsecured Cla
Last 4 digits of account number
On which entry in Part 1 or Part 2 did you list the original creditor?
Line of (Check one): Part 1: Creditors with Priority Unsecured Claims
Claims Part 2: Creditors with Nonpriority Unsecured
Last 4 digits of account number
On which entry in Part 1 or Part 2 did you list the original creditor?
Line of (Check one): Part 1: Creditors with Priority Unsecured Claims
Part 2: Creditors with Nonpriority Unsecured
Claims Claims
Last 4 digits of account number
On which entry in Part 1 or Part 2 did you list the original creditor?
Line of (Check one): Part 1: Creditors with Priority Unsecured Claims
Part 2: Creditors with Nonpriority Unsecured
Claims
Last 4 digits of account number
On which entry in Part 1 or Part 2 did you list the original creditor?
Line of (Check one): Part 1: Creditors with Priority Unsecured Claims
Claims Part 2: Creditors with Nonpriority Unsecured
Last 4 digits of account number
On which entry in Part 1 or Part 2 did you list the original creditor?
Line of (Check one): Part 1: Creditors with Priority Unsecured Claims
Claims Part 2: Creditors with Nonpriority Unsecured
Last 4 digits of account number
On which entry in Part 1 or Part 2 did you list the original creditor?
Line of (Check one): Part 1: Craditors with Driving University
Line of (Check one): Part 1: Creditors with Priority Unsecured Claims Part 2: Creditors with Nonpriority Unsecured

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First Name Middle Name Last Name (# Known)

Debtor 1

Part 4:

Add the Amounts for Each Type of Unsecured Claim

6. Total the amounts of certain types of unsecured claims. This information is for statistical reporting purposes only. 28 U.S.C. § 159. Add the amounts for each type of unsecured claim.

				Total claim	
Total claims	6a	Domestic support obligations	6a.	\$	0.00
from Part 1	6b	Taxes and certain other debts you owe the government	6b.	\$	600.00
	6c.	Claims for death or personal injury while you were intoxicated	6c.	\$	0.00
	6d.	Other. Add all other priority unsecured claims. Write that amount here.	6d.	+\$	0.00
	6e.	Total. Add lines 6a through 6d.	6e.	\$	600.00
				Total claim	
Total claims	6f.	Student loans	6f.	\$	0.00
from Part 2	6g.	Obligations arising out of a separation agreement or divorce that you did not report as priority claims	6g.	\$	0.00
	6h.	Debts to pension or profit-sharing plans, and other similar debts	6h.	\$	0.00
	6i.	Other. Add all other nonpriority unsecured claims. Write that amount here.	6i.	+ \$	10,408.00

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Fill in this	information to ident	ify your case:			
Debtor	Mario		Hammond		
Debtoi	First Name	Middle Name	Last Name		
Debtor 2 (Spouse if filing	I) First Name	Middle Name	Last Name		
		ne: Northern District of Illin			
	• -	ie: Northern District of fift	IOIS		
Case number (If known)					Check if this is all amended filing
					ŭ
Official	Form 106G	_			
Sched	ule G: Exe	cutory Conf	tracts and	Unexpired Leases	12/15
1. Do you I 1. Do you I No. C Yes.	in more space is near iges, write your name have any executory Check this box and file Fill in all of the informatately each person	contracts or unexpired ethis form with the court of the countracts or unexpired the countracts or unexpired ethis form with the countraction below even if the countraction below even if the countraction or company with whom	al page, fill it out, nun (nown). leases? with your other schedu ontracts or leases are i	ether, both are equally responsible for supply niber the entries, and attach it to this page. On less. You have nothing else to report on this form isted on Schedule A/B: Property (Official Form 10 ct or lease. Then state what each contract or less.	of the top of any
example unexpired	, rent, venicie lease	, cell phone). See the ins	structions for this form	in the instruction booklet for more examples of ex	ecutory contracts and
Person o	or company with wh	om you have the contra	ect or lease	State what the contract or lease is for	
2.1,					
Name			74*************************************		
*	****				
Number	Street				
City		State ZIP Code			
.2	adadan ing at tang mawang at ang	amende of the second of the second of		en transcription de la company de la comp	
Name		····			
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Name	***************************************				
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MULLIDEL	Street				
City		Stoto ZID Code			

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	лапо			Hammond	Case number (if known)	
F	irst Name Mid	die Name	Last Name			
177733						
A	dditional Paç	je if You H	ave More Co	ntracts or Leases		
D		. 	b 4b		NAME OF THE PARTY	
Person o	r company wit	h whom you	have the conf	ract or lease	What the contract or lease is for	
Name						
Number	Street					
City		State	ZIP Code			
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Name						
Number	Street		·			
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Name			•			
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City		State	ZIP Code			
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7 14111-2						
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City		State	ZIP Code			
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City		State	ZIP Code			
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Name						
Number	Street					

State ZIP Code

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Fill in this	information to ide	entify your case:				
Debtor 1	Mario		Hammon			
Debtor 2	First Name	Middle Name	Last Name			
(Spouse, if filin	g) First Name	Middle Name	Last Name	**************************************		
United State	s Bankruptcy Court fo	or the: Northern District of III	inois			
Case numbe	F					
				<u></u>	☐ Check if this	
Official	Form 106H	J			amended fil	ıng
······································	······································	<u>'-</u> our Codebtor	_			
						2/15
e maig tog id number	the entries in the	Qually responsible for sur	iniviaa correct in	formation If more	omplete and accurate as pressed e space is needed, copy the Additional Page, fill it On the top of any Additional Pages, write your nat	out, ne ar
✓ No	have any codebto	ors? (If you are filing a joint	case, do not list ei	ther spouse as a o	codebtor.)	
Yes						
t. Within to Arizona	he last 8 years, ha California Idaho	ave you lived in a commu Louisiana, Nevada, New M	nity property stat	or territory? (Co	ommunity property states and territories include	
	Go to line 3.	Louisiana, Nevaua, New IVI	exico, Puerto Rico	, rexas, vvasningt	on, and Wisconsin.)	
		former spouse, or legal equ	ivalent live with vo	u at the time?		
			yo	a at the time;		
		nunity state or territory did y	ou live?	. Fill i	in the name and current address of that person.	
					and the same day on address of that person.	
<u>.</u>	Name of your spouse, for	rmer spouse, or legal equivalent				
Ī	Number Street		to The Part Land Control of the Cont			
44	11-1-1					
	City	State		ZIP Code		
Schedul	ו ווחפ 2 again as a e D (Official Form	a codebtor only if that per	son is a quaranto	г or cosigner. Ма	our spouse is filing with you. List the person lke sure you have listed the creditor on (Official Form 106G). Use Schedule D,	
	1: Your codebtor				Ortoma B. The court in	
					Column 2: The creditor to whom you owe the de	bt
1					Check all schedules that apply:	
Name					☐ Schedule D, line	
					☐ Schedule E/F, line	
Number	Street		, 10 H8W-14 - 1		☐ Schedule G, line	
City		State		ZIP Code		٠
Name			, , , , , , , , , , , , , , , , , , , ,		☐ Schedule D, line	
Number	Street				Schedule E/F, line	
~					Schedule G, line	
City		State		ZIP Code		:
Name			**************************************	·	☐ Schedule D, line	:
ध्यसम					☐ Schedule E/F, line	:
Number	Street				Schedule G, line	
City		State		ZIP Code		:
•		O LOCA		COUC		

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Debtor 1

Mario First Name Hammond Case number (if known)_ Middle Name Last Name

Column 1	Your codebtor			Column 2: The creditor to whom you owe the debt
1				Check all schedules that apply:
Name	THE THE THE THE TAXABLE A		NOTIFIED TO SELECT THE	Schedule D, line
Haric				☐ Schedule E/F, line
Number	Street			Schedule G, line
City		State	ZIP Code	
Name				Schedule D, line
7131110				☐ Schedule E/F, line
Number	Street	379 American State Announce And Andrew Health Service State of Service		☐ Schedule G, line
City		State	ZIP Code	
Name				☐ Schedule D, line
				☐ Schedule E/F, line
Number	Street			☐ Schedule G, line
City		State	ZIP Code	
Name		· · · · · · · · · · · · · · · · · · ·		☐ Schedule D, line
				☐ Schedule E/F, line
Number	Street			☐ Schedule G, line
City	AND THE PARTY AN	State	ZIP Code	
Name				☐ Schedule D, line
				☐ Schedule E/F, line
Number	Street			☐ Schedule G, line
City		State	ZIP Code	
Name				☐ Schedule D, line
				☐ Schedule E/F, line
Number	Street			☐ Schedule G, line
City		State	ZIP Code	
Name				Schedule D, line
				Schedule E/F, line
Number	Street			☐ Schedule G, line
City		State	ZiP Code	
Name				Schedule D, line
				☐ Schedule E/F, line
Number	Street	***************************************	77.77.88110	Schedule G, line
City		State	ZiP Code	

Fill in this i	pformation to identify			SPACE SA	N. W. W.			
	nformation to identify	y your case.		40.00	MARKE			
Debtor 1	Mario First Name	Middle Name	Hammond Last Name					
Debtor 2 (Spouse, if filing) First Name	Middle Name	Last Name					
	•	Northern District of Illinois						
Case number	• •		•			Charle i	E Aluita da .	
(if known)			-			Check if	rtnis is: mended filing	
							pplement showing postpetition chapt	er 13
Official Forms 4001							ne as of the following date:	
Official Form 106I					MM / DD / YYYY			
Sched	lule I: You	ur Income					12/	15
r you are sep separate she	parated and your spo et to this form. On the Describe Employn	use is not filing with you e top of any additional pa	. do not include i	nform	ation aho	ut vour en	you, include information about your souse. If more space is needed, attach known). Answer every question.	pouse
	ll in your employment formation.			Debtor 1			Debtor 2 or non-filing spouse	
attach a se	f you have more than one job, attach a separate page with information about additional employers.		☑ Employed ☐ Not employed			en e	☐ Employed ☐ Not employed	
Include pa	rt-time, seasonal, or yed work.							
Occupation	n may include student aker, if it applies.	Occupation	Barber	VIII. 1. 1.			None	
		Employer's name	Self Employed					
		Employer's address	720 West 76 Number Street		treet		Number Street	
			Chicago		IL	60620		
			City	Sta	te ZIP C	ode	City State ZIP Code	}
		How long employed the	re?				and the later was a second as	
Part 2:	Give Details About	Monthly Income						
spouse unit	ess you are separated. ur non-filing spouse ha	•	er. combine the inf				write \$0 in the space. Include your non-filing	ng
					For C	ebtor 1	For Debtor 2 or non-filing spouse	
List mont deductions	List monthly gross wages, salary, and commissions (before all payroll deductions). If not paid monthly, calculate what the monthly wage would be. 2. \$_					0.00	\$	
3. Estimate a	Estimate and list monthly overtime pay.				+ \$	0.00	+ \$	
4. Calculate	gross income. Add lir	ne 2 + line 3.		4.	\$	0.00	\$	

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Mario Hammond Debtor 1 Case number (if known For Debtor 1 For Debtor 2 or non-filing spouse 0.00 Copy line 4 here..... 5. List all payroll deductions: 5a. Tax, Medicare, and Social Security deductions 0.00 5a. 5b. Mandatory contributions for retirement plans 0.00 5b. 5c. Voluntary contributions for retirement plans 0.00 5c. 0.00 5d. Required repayments of retirement fund loans 5d. 5e. Insurance 0.00 5e. 5f. Domestic support obligations 0.00 5f. 0.00 5g. Union dues 5g. 5h. Other deductions. Specify: 0.00 Add the payroli deductions. Add lines 5a + 5b + 5c + 5d + 5e +5f + 5g + 5h. 0.00 7. Calculate total monthly take-home pay. Subtract line 6 from line 4. 0.00 8. List all other income regularly received: 8a. Net income from rental property and from operating a business. profession, or farm Attach a statement for each property and business showing gross receipts, ordinary and necessary business expenses, and the total 0.00 monthly net income. 8b. Interest and dividends 0.00 8b 8c. Family support payments that you, a non-filing spouse, or a dependent regularly receive Include alimony, spousal support, child support, maintenance, divorce 0.00 settlement, and property settlement. 8c. 0.00 8d. Unemployment compensation 8d. 8e. Social Security 8e. 0.00 8f. Other government assistance that you regularly receive Include cash assistance and the value (if known) of any non-cash assistance that you receive, such as food stamps (benefits under the Supplemental Nutrition Assistance Program) or housing subsidies. Specify: 0.00 8f. 8g. 8g. Pension or retirement income 0.008h. Other monthly income. Specify: 8h. 1,000.00 9. Add all other income. Add lines 8a + 8b + 8c + 8d + 8e + 8f +8q + 8h. 1.000.00 10. Calculate monthly income. Add line 7 + line 9. 1,000.00 0.00 1.000.00 Add the entries in line 10 for Debtor 1 and Debtor 2 or non-filing spouse. 11. State all other regular contributions to the expenses that you list in Schedule J. Include contributions from an unmarried partner, members of your household, your dependents, your roommates, and other friends or relatives. Do not include any amounts already included in lines 2-10 or amounts that are not available to pay expenses listed in Schedule J. 0.00 Specify: 11 🛨 12. Add the amount in the last column of line 10 to the amount in line 11. The result is the combined monthly income. 1,000.00 Write that amount on the Summary of Your Assets and Liabilities and Certain Statistical Information, if it applies 12. Combined monthly income 13. Do you expect an increase or decrease within the year after you file this form? Mo. Yes. Explain:

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Fill in this information to identify	y your case:			
Debtor 1 Mario	Hammor	nd Check if thi	- i	
First Name Debtor 2	Middle Name Last Name			
(Spouse, if filing) First Name	Middle Name Last Name	An ame	nded filing ement showing post	notition chapter 12
United States Bankruptcy Court for the	Northern District of Illinois		ement showing post es as of the following	
Case number (If known)	10 - 10 - 10 - 10 - 10 - 10 - 10 - 10 -	MM / DD	I YYYY	
Official Form 106J				
Schedule J: Yo	- our Expenses			12/ 1 5
Be as complete and accurate as p	oossible. If two married people are fil ded, attach another sheet to this form			ing correct
Part 1: Describe Your Ho	usehold			
1. Is this a joint case?				
No. Go to line 2. Yes. Does Debtor 2 live in a	separate household?			
□ No	•			
Yes. Debtor 2 must fi	ile Official Form 106J-2, Expenses for S	Separate Household of Debtor 2.		
2. Do you have dependents?	□ No	Dependent's relationship to	Dependent's	Does dependent live
Do not list Debtor 1 and Debtor 2.	Yes. Fill out this information for each dependent	Debtor 1 or Debtor 2	age = consumeron	with you?
Do not state the dependents' names.		Daughter	<u>12 yo</u>	Yes
		NAMES OF THE PROPERTY OF THE P		☐ No ☐ Yes
				□ No
				Yes
				□ No
				∠ Yes
			***************************************	☐ No ☐ Yes
Do your expenses include expenses of people other than yourself and your dependents?	Mo □ Yes			
Part 2: Estimate Your Ongo	ing Monthly Expenses			
	r bankruptcy filing date unless you a	are using this form as a supplem	ent in a Chapter 13 c	ase to report
	nkruptcy is filed. If this is a suppleme		_	-
Include expenses paid for with no	n-cash government assistance if you	know the value of		
	d it on Schedule I: Your Income (Offi	•	Your expe	NSOS vertinetiskistenkinsisenkin til etkiskistenkintinnikkistensinyvaansiäns
 The rental or home ownership any rent for the ground or lot. 	expenses for your residence. Include	first mortgage payments and	4. \$	500.00
If not included in line 4:			_	0.00
4a. Real estate taxes			4a. \$	0.00
4b. Property, homeowner's, or a			4b. \$	0.00
Home maintenance, repair, Homeowner's association o			4c. \$ 4d. \$	0.00
TI. I TOTHEOWITE S ASSOCIATION O	n conduminanti daes		4d. \$	

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Debtor 1 Mario Hammond Case number (if known)_

		Your ex	penses
5. Additional mortgage payments for your residence, such as home equity loans	5.	\$	0.00
6. Utilities:	٠.		
6a. Electricity, heat, natural gas	6a.	\$	150.00
6b. Water, sewer, garbage collection	6b.		0.00
6c. Telephone, cell phone, Internet, satellite, and cable services	6c.	\$	75.00
6d. Other. Specify:	6d.	Ψ \$	0.00
7. Food and housekeeping supplies		ψ	200.00
	7.	Φ	0.00
8. Childcare and children's education costs	8.	\$	400.00
9. Clothing, laundry, and dry cleaning	9.	\$	FO 00
10. Personal care products and services	10.	\$	
11. Medical and dental expenses	11.	\$	0.00
 Transportation. Include gas, maintenance, bus or train fare. Do not include car payments. 	12.	\$	190.00
13. Entertainment, clubs, recreation, newspapers, magazines, and books	13.	¢	0.00
14. Charitable contributions and religious donations	14.	\$ \$	0.00
•	17.	Ψ	
 Insurance. Do not include insurance deducted from your pay or included in lines 4 or 20. 			
15a. Life insurance	15a.	\$	0.00
15b. Health insurance	15b.	\$	0.00
15c. Vehicle insurance	15c.	\$	0.00
15d. Other insurance. Specify:	15d.	\$	0.00
16. Taxes. Do not include taxes deducted from your pay or included in lines 4 or 20. Specify:	16.	\$	0.00
17. Installment or lease payments:			
17a. Car payments for Vehicle 1	17a.	\$	0.00
17b. Car payments for Vehicle 2	17b.	\$	0.00
17c. Other. Specify:	17c.	\$	0.00
17d. Other. Specify:	17d.	\$	0.00
	,		
 Your payments of alimony, maintenance, and support that you did not report as deducted from your pay on line 5, Schedule I, Your Income (Official Form 106I). 	18.	\$	0.00
19. Other payments you make to support others who do not live with you.			
Specify:	19.	\$	0.00
20. Other real property expenses not included in lines 4 or 5 of this form or on Schedule I: Your Inco.	me.		
20a. Mortgages on other property	20a.	\$	0.00
20b. Real estate taxes	20b.	\$	0.00
20c. Property, homeowner's, or renter's insurance	20c.	\$	0.00
20d. Maintenance, repair, and upkeep expenses	20d.	\$	0.00
20e. Homeowner's association or condominium dues	20e.	\$	0.00

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Debtor	Mario Hammond Case r	number (if known)		
21. Ot	her. Specify:	21.	+\$	0.00
22. Ca	culate your monthly expenses.			
226	a. Add lines 4 through 21.	22a.	\$	1,265.00
221	c. Copy line 22 (monthly expenses for Debtor 2), if any, from Official Form 106J-2	22b.	\$	0.00
220	c. Add line 22a and 22b. The result is your monthly expenses.	22c .	\$	1,265.00
23. Cal c	culate your monthly net income.			
23a.	Copy line 12 (your combined monthly income) from Schedule I.	23a.	\$	1,000.00
23b.	Copy your monthly expenses from line 22c above.	23b.	-\$	1,265.00
23c .	Subtract your monthly expenses from your monthly income. The result is your monthly net income.	23c .	\$	-265.00
24. Do j	ou expect an increase or decrease in your expenses within the year after you file this	form?		
	example, do you expect to finish paying for your car loan within the year or do you expect yo gage payment to increase or decrease because of a modification to the terms of your mortga			
2	•			
,	es. Explain here:			

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Fill in t	this information	to identify your case:				
Debtor	1 Mario	Middle Name	Hammon Last Name	d		
Debtor : (Spouse,	2 if filing) First Name	Middle Name	Last Name			
United 8	States Bankruptcy C	ourt for the: Northern District o	f Illinois			
Case nu			***************************************			Check if this is an
L	-		THE PARTY OF THE P			amended filing
	al Form 1	····				
		Financial Affa				
informat	ion. If more spa	ırate as possible. If two maı ce is needed, attach a sepa	rried people are filln rate sheet to this for	g together, both are equally m. On the top of any additi	y responsible for supplyin ional pages, write your na	g correct me and case
number	(if known). Answ	er every question.		, ,	, ,	
Part 1	Give Detail	s About Your Marital St	atus and Where Y	ou Lived Before		
1. Wha	at is your current	marital status?				
	Married	. manus suus:				
	Not married					
2 Duri	inn the last 3 ves	ers, have you lived anywhere	a other than where y	eas live new?		
1		no, nave you hveu anywhere	s other than where y	od live flow?		
	Yes. List all of the	places you lived in the last 3	years. Do not include	where you live now.		
	Debtor 1:		Dates Debtor 1 lived there	Debtor 2:		Dates Debtor 2 lived there
				Same as Debtor 1		Same as Debtor 1
	Number Stre	et .	_ From	Number Street	,	From
	realisaci og c	o.	То	Number Street		To
			_			
	City	State ZIP Code	-	City	State ZiP Code	
				Same as Debtor 1		Same as Debtor 1
	Number Stre	et	_ From	Number Street	The state of the s	From
			To			To
			_		THE SECOND SECON	
	City	State ZIP Code	•	City	State ZIP Code	
3. With	nin the last 8 yea es and territories i	rs, did you ever live with a s nclude Arizona, California, Ida	pouse or legal equivato, Louisiana. Nevad	valent in a community prop	erty state or territory? (Co. Texas, Washington, and V	ommunity property Visconsin \
2	No				, roxuo, viuoringtori, uno v	visuoriam.y
	res. Make sure yo	ou fill out Schedule H: Your Co	odebtors (Official For	n 106H).		
	ı					
Part 2:	Explain the	Sources of Your Income				

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Debto	or 1	Mario		Hammond	Case nu	mber (if known)	
		First Name	Middle Name Last P	iame			
4.	Fill in	the total amou are filing a joir	nt of income you received at case and you have inco	t or from operating a bus I from all jobs and all busion me that you receive toget	nesses, including part-tir		ndar years?
	∠ 2 Y	es. Fill in the de	etails.	Debtor 1		Debtor 2	
				Sources of income Check all that apply.	Gross income (before deductions and exclusions)	Sources of income Check all that apply.	Gross income (before deductions and exclusions)
			1 of current year until led for bankruptcy:	Wages, commissions, bonuses, tipsOperating a business	\$12,000.00	☐ Wages, commissions, bonuses, tips☐ Operating a business	\$
		For last calend	ecember 31, 2015)	✓ Wages, commissions, bonuses, tips✓ Operating a business	\$ 12,000.00	Wages, commissions, bonuses, tips Operating a business	\$
			ar year before that: ecember 31, 2014	✓ Wages, commissions, bonuses, tips✓ Operating a business	\$ 6,000.00	Wages, commissions, bonuses, tips Operating a business	\$
	Included unem gamb	de income rega aployment, and oling and lottery each source and	rdless of whether that inc other public benefit paym winnings. If you are filing I the gross income from e	ents; pensions; rental inco	of other income are alinome; interest; dividends; e income that you receiv	nony; child support; Social S money collected from laws ed together, list it only once t you listed in line 4.	uits; royalties; and
	Y	es. Fill in the de	etails.	Debtor 1		Debtor 2	
				Sources of income Describe below.	Gross income from each source (before deductions and exclusions)	Sources of income Describe below.	Gross income from each source (before deductions and exclusions)
			1 of current year until iled for bankruptcy:				
		For last calend	dar year: December 31,2015		\$		\$
		*	dar year before that:		\$		\$ \$
			1111		\$		\$

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Hammond Case number (if known)_ Mario Debtor 1 Middle Name List Certain Payments You Made Before You Filed for Bankruptcy Part 3: 6. Are either Debtor 1's or Debtor 2's debts primarily consumer debts? ☐ No. Neither Debtor 1 nor Debtor 2 has primarily consumer debts. Consumer debts are defined in 11 U.S.C. § 101(8) as "incurred by an individual primarily for a personal, family, or household purpose." During the 90 days before you filed for bankruptcy, did you pay any creditor a total of \$6,225* or more? No. Go to line 7. Yes. List below each creditor to whom you paid a total of \$6,225* or more in one or more payments and the total amount you paid that creditor. Do not include payments for domestic support obligations, such as child support and alimony. Also, do not include payments to an attorney for this bankruptcy case. * Subject to adjustment on 4/01/16 and every 3 years after that for cases filed on or after the date of adjustment. Yes. Debtor 1 or Debtor 2 or both have primarily consumer debts. During the 90 days before you filed for bankruptcy, did you pay any creditor a total of \$600 or more? No. Go to line 7. Yes. List below each creditor to whom you paid a total of \$600 or more and the total amount you paid that creditor. Do not include payments for domestic support obligations, such as child support and alimony. Also, do not include payments to an attorney for this bankruptcy case. Was this payment for... Amount you still owe Total amount paid Dates of payment ☐ Mortgage Creditor's Name Car Credit card Number Street Loan repayment Suppliers or vendors Other ___ ZIP Code State ■ Mortgage Creditor's Name ☐ Car Credit card Number Street Loan repayment Suppliers or vendors Other State ZIP Code City ☐ Mortgage Creditor's Name Car Credit card Number Street Loan repayment Suppliers or vendors Other_ ZIP Code State City

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btor 1	Mario		Hammon	a	Case number (if known)_	1.0000000000000000000000000000000000000	
	First Name Middle Name	Last Name					
Inside corpo agen	in 1 year before you filed fo ers include your relatives; an orations of which you are an o t, including one for a busines as child support and alimony	y general partners; n officer, director, pers s you operate as a s	elatives of any on in control, or	general partners; p owner of 20% or	partnerships of which more of their voting	n you are a general partner; securities; and any managi	ng
☐ Y	'es. List all payments to an in	sider.	Dates of payment	Total amount paid	Amount you still owe	Reason for this payment	N.
				\$	\$		
	Insider's Name			•	•		
	Number Street						
	City	State ZIP Code					
	Insider's Name			\$	\$		
	Number Street						
		A. A					
	City	State ZIP Code	-	,			
an ir Inclu	in 1 year before you filed fonsider? Ide payments on debts guara No Yes. List all payments that be	nteed or cosigned by		oayments or trans Total amount paid		n account of a debt that b Reason for this payment Include creditor's name	enefited
	La Caracian			\$. \$		
	Insider's Name						
	Number Street						
			-				
	City	State ZIP Code					
	Insider's Name		-	\$	<u> </u>		
	Number Street		- ·····				
	THE STATE OF THE S		_				
		State 7iP Code	.				
	Carlo	Chain 710 Code					

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Debtor 1	Mario	le Name / est Name	Hammond	Case number (# #	(nawn)	
	nation materials	le Name Last Name		(3,	<i></i>	
Part 4	ldentify Legal	Actions, Renoscocc	ions, and Foreclosures			
9. With	in 1 year before you	filed for bankruptcy w	vera vou a narty in any law		lead a decide of the second	
	all such matters, inclui contract disputes.	ding personal injury case	es, small claims actions, dive	orces, collection suits, pa	iministrative prod iternity actions, su	e eding? oport or custody modification
2	•					,
	es. Fill in the details.					
		Nat	ture of the case	Court or agency		8 6
				The same of the sa		Status of the case
,	Case title			Court Name		Pending
•						On appeal
,	Case number			Number Street	······································	Concluded
`				City	State ZIP Code	
				,	TIP CODE	
C	Case title			Court Name		Pending
		···		Coun name		On appeal
				Number Street		Concluded
C	Case number					
				City Si	tate ZIP Code	***************************************
_ ,0	s. Fill in the informatio	in below.	Describe the property	s e e e e e e e e e e e e e e e e e e e	Date	Value of the property
				· · · · · · · · · · · · · · · · · · ·		Talle of the property
	Creditor's Name		NA was			
				t ex t		
	Number Street		Explain what happened			
			Property was repos			
			Property was forecProperty was garni			
	City	State ZIP Code		hed, seized, or levied.		
			Describe the property		Date	Value of the property
						value of the property
	***					\$
	Creditor's Name		_			¥
	Number Street					
			Explain what happened			
			Property was repos			
			Property was forecht Property was garnis			
	City	State ZIP Code		hed. ed, seized, or levied.		
			- F y read diction	, voicou, or icvicu.		

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Fithin 90 days before you filed for bankruptcy, did any creditor, including a bank or financial institution, set off any amounts from yo coounts or refuse to make a payment because you owed a debt? No	1	Mario	Hammond	Case number (if known)	
Thin 1 year before you filed for bankruptcy, was any of your property in the possession of an assignee for the benefit of recitors, a court-appointed receiver, a custodian, or another official? A No 1 Yes 5 List Certain Gifts and Contributions Fithin 2 years before you filed for bankruptcy, did you give any gifts with a total value of more than \$600 per person? A No 1 Yes, Fill in the details for each gift. Gifts with a total value of more than \$600 Describe the gifts Dates you gave the gift S Number Street City State ZIP Code Person's relationship to you Gifts with a total value of more than \$500 Describe the gifts Dates you gave the gift \$ Limiter Street Number Street S Limiter Street S Last 4 digits of account number: XXXX— In the possession of an assignee for the benefit of recitions assignee for the benefit of recitions? Dates you gave the self of the person is without You Gave the Gift S Limiter Street S Last 4 digits of account number: XXXX— State ZIP Code S Last 4 digits of account number: XXXX— State ZIP Code S Last 4 digits of account number: XXXX— State ZIP Code S Last 4 digits of account number: XXXX— State ZIP Code S Last 4 digits of account number: XXXX— State ZIP Code S Last 4 digits of account number: XXXX— State ZIP Code S Last 4 digits of account number: XXXX— State ZIP Code S Last 4 digits of account number: XXXX— State ZIP Code S Last 4 digits of account number: XXXX— State ZIP Code S Last 4 digits of account number: XXXX— State ZIP Code S Last 4 digits of account number: XXXX— State ZIP Code S Last 4 digits of account number: XXXX— State ZIP Code S Last 4 digits of account number: XXXX— State ZIP Code S Last 4 digits of account number: XXXX— State ZIP Code S Last 4 digits of account number: XXXX— State ZIP Code S Last 4 digits of account number: XXXX— State ZIP Code S Last 4 digits of account number: XXXX— S Last 4 digits of account number: XXXX— S Last 4 digits of account number: XXXX— S Last 4 digits of accou		First Name Middle Name Last	Name	Fabruary and the second	
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No 1 Yes Fill in the details Describe the action the creditor took Deta action Amount was taken Amount Amount Was taken Amount Was taken Amount	/ith	in 90 days before you filed for bankru	ptcy, did any creditor, including a bank	or financial institution, set off any ar	nounts from you
Describe the action the creditor took Determination Dete	cco	ounts or refuse to make a payment be		-	-
Describe the action the creditor took Date action was taken Amount Cheditor's Name Number Street Last 4 digits of account number: XXXX.—	_				
City State ZIP Code Last 4 digits of account number: XXXX— Ithin 1 year before you filed for bankruptcy, was any of your property in the possession of an assignee for the benefit of reditors, a court-appointed receiver, a custodian, or another official? No	J Y	es. Fill in the details.			
Tribution 1 Name Name State Sta			Describe the action the creditor took	Date action	Amount
Number Street Str	_	anditor's None		was taken	
State ZIP Code Last 4 digits of account number: XXXX	•	rediots rame			
Ferson's When You Gave the Git City State ZIP Code Last 4 digits of account number: XXXX—	Ñ	umber Street	-		\$
fithin 1 year before you filed for bankruptcy, was any of your property in the possession of an assignee for the benefit of recitors, a court-appointed receiver, a custodian, or another official? No					
fithin 1 year before you filed for bankruptcy, was any of your property in the possession of an assignee for the benefit of recitions, a court-appointed receiver, a custodian, or another official? No		environment of the second section of the second section of the second se	_		
### Action of the process of the benefit of reditors, a court-appointed receiver, a custodian, or another official? No	=				
Inthin 2 years before you filed for bankruptcy, did you give any gifts with a total value of more than \$600 per person? No. Yes. Fill in the details for each gift. Gifts with a total value of more than \$600 per ceribe the gifts Dates you gave the gifts Person to Whom You Gave the Gift Number Street City State ZIP Code Person's relationship to you Gifts with a total value of more than \$600 per person Describe the gifts Dates you gave the gifts \$	C	ity State ZIP Code	Last 4 digits of account number: XXXX	**************************************	
State ZIP Code					
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Situate Certain Gifts and Contributions Italian 2 years before you filed for bankruptcy, did you give any gifts with a total value of more than \$600 per person? No.			stodian, or another official:		
Sithin 2 years before you filed for bankruptcy, did you give any gifts with a total value of more than \$600 per person? No Yes. Fill in the details for each gift. Gifts with a total value of more than \$600 Describe the gifts Dates you gave the gift S					
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No Yes. Fill in the details for each gift. Gifts with a total value of more than \$600 per person Person to Whom You Gave the Gift Number Street City State ZIP Code Person's relationship to you Gifts with a total value of more than \$600 per person Describe the gifts Dates you gave the gifts \$					
No Yes. Fill in the details for each gift. Gifts with a total value of more than \$600 per person Describe the gifts Dates you gave the gifts S	ithi	in 2 years before you filed for bankrug	otcy, did you give any gifts with a total v	/alue of more than \$600 per person?	
Yes. Fill in the details for each gift. Gifts with a total value of more than \$600 per person Describe the gifts					
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Person to Whom You Gave the Gift S			Describe the gifts		Value
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Person's relationship to you Gifts with a total value of more than \$600 Describe the gifts Dates you gave the gifts Person to Whom You Gave the Gift Number Street	~	State 717 Cada	-		
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Person to Whom You Gave the Gift S Number Street		• - • • - •	-		Value
Number Street	μ	er puroun		ជាម ជួយន	
Number Street					œ
	Pe	erson to Whom You Gave the Gift	-	<u> </u>	Φ
					œ
		\$4.6 A COLOR OF THE STATE OF TH	-	Control of the Contro	Ψ
City State ZiP Code	N	umber Street	=		
City State ZiP Code					
	Ĉi	ty State ZIP Code	-		
	L. A	erson's relationship to you			

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Include the amount that insurance has paid. List pending insurance claims on line 33 of Schedule A/B: Property. \$ List Certain Payments or Transfers	btor 1	Mario First Name Middle Name La	Hammond Case	number (if known)	
Ves. Fill in the details for each gift or contribution. Gifts or contributions to charities that total more than \$600 Describe what you contributed Date you	. Withi	in 2 years before you filed for bankru	ptcy, did you give any gifts or contributions w	rith a total value of more than	\$600 to any charity?
Cherity's Name S			ntribution.		
Number Street State ZIP Code			Describe what you contributed		Value
City State ZIP Code Within 1 year before you filed for bankruptcy or since you filed for bankruptcy, did you lose anything because of theft, fire, other disaster, or gambling? No Yes. Fill in the details. Describe the property you lost and how the loss occurred Include the amount that insurance coverage for the loss Include the amount that insurance has paid. List pending insurance loss Include the amount that insurance has paid. List pending insurance dains on line 33 of Schedule A/B: Property. \$ 17: List Certain Payments or Transfers Within 1 year before you filed for bankruptcy, did you or anyone else acting on your behalf pay or transfer any property to anyone ou consulted about seeking bankruptcy or preparing a bankruptcy petition? Person who was paid any altorneys, bankruptcy petition preparers, or credit counseling agencies for services required in your bankruptcy. No I Yes. Fill in the details. Description and value of any property transferred Person Who Was Paid S City State ZiP Code	CI	harity's Name	-		\$
City State ZIP Code City State ZIP Code		To an experience of early distributions and the second sec	-		\$
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Within 1 year before you filed for bankruptcy or since you filed for bankruptcy, did you lose anything because of theft, fire, other disaster, or gambling? No Yes. Fill in the details. Describe the property you lost and how the loss occurred Include the amount that insurance has paid. List pending insurance loss Include the amount that insurance has paid. List pending insurance loss Include the amount that insurance has paid. List pending insurance loss Include the amount that insurance has paid. List pending insurance loss Include the amount that insurance has paid. List pending insurance loss Include the amount that insurance has paid. List pending insurance loss Include the amount that insurance has paid. List pending insurance loss Include the amount that insurance has paid. List pending insurance loss Include the amount that insurance has paid. List pending insurance loss Include the amount that insurance has paid. List pending insurance loss Include the amount that insurance has paid. List pending insurance loss Include the amount that insurance has paid. List pending insurance loss Include the amount that insurance has paid. List pending insurance loss Include the amount that insurance has paid. List pending insurance loss Include the amount that insurance has paid. List pending insurance loss Include the amount that insurance has paid. List pending insurance loss in the opportunity. Include the amount that insurance has paid. List pending insurance loss in the opportunity. Include the amount that insurance has paid. List pending insurance loss in the opportunity. Include the amount that insurance has paid. List pending insurance loss in the opportunity. Include the amount that insurance has paid. List pending insurance loss in the opportunity. Include the amount that insurance has paid. List pending insurance loss in the opportunity. Include the amount that insurance has paid. List pending insurance loss in the opportunity. Include the amount that insurance has paid. List pendin	Cit	ty State ZIP Code			
Describe the property you lost and how the loss occurred Describe any insurance coverage for the loss Date of your lost	rt 6:	List Certain Losses			
Within 1 year before you filed for bankruptcy, did you or anyone else acting on your behalf pay or transfer any property to anyone you consulted about seeking bankruptcy or preparing a bankruptcy petition? Include any attorneys, bankruptcy petition preparers, or credit counseling agencies for services required in your bankruptcy. No Person Who Was Paid Number Street Date payment or transfer was made \$ City State ZIP Code	t	Describe the property you lost and	Include the amount that insurance has paid. List per claims on line 33 of Schedule A/B: Property.	loss nding insurance	Value of property lost
Within 1 year before you filed for bankruptcy, did you or anyone else acting on your behalf pay or transfer any property to anyone you consulted about seeking bankruptcy or preparing a bankruptcy petition? Include any attorneys, bankruptcy petition preparers, or credit counseling agencies for services required in your bankruptcy. No No Person Who Was Paid Number Street State ZIP Code Page 18					\$
Person Who Was Paid Number Street State ZIP Code Date payment or transfer was made Amount of payment or transfer was made \$	Within you controlled	n 1 year before you filed for bankrupt onsulted about seeking bankruptcy e any attorneys, bankruptcy petition pro	tcy, did you or anyone else acting on your bel or preparing a bankruptcy petition?		ty to anyone
Person Who Was Paid Number Street \$ City State ZIP Code	immed 1 C	s. Chi ili the detabs.	Description and value of any property transferred		· Amount of payment
City State ZIP Code	P	erson Who Was Paid	•		
	Ñ	tumber Street			\$
	_				\$
	Ċ	ity State ZIP Code			
Email or website address	E	mail or website address			

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	Mario	*****	<u>Hammon</u> d	Case number (if known)		
	First Name Middle Name	Last	t Name			,
	The state of the s					
			Description and value of any prop	erty transferred	Date payment or transfer was made	Amount of payment
	Person Who Was Paid			•		
						\$
	Number Street					c
		· · · · · · · · · · · · · · · · · · ·			***************************************	Ψ
	City State	ZIP Code				
	Email or website address					
	Person Who Made the Payment, if f	Not You				
4	not include any payment or to No Yes. Fill in the details.	·				
_	Too. I in it the details.		Description and value of any prope	erty transferred	Date payment or	Amount of payr
					transfer was	ranount or pay.
	Person Who Was Paid					
	Number Street				***************************************	\$
	The state of the s					¢
	City State	ZIP Code				Ψ
. Witl	hin 2 years before you filed	for bankrup	otcy, did you sell, trade, or otherw	rise transfer any property to	anyone, other tha	n property
tran	nsferred in the ordinary cou	irse of your l	otcy, did you sell, trade, or otherw business or financial affairs?			
tran Incli Do i	nsferred in the ordinary cou ude both outright transfers ar not include gifts and transfers	i <mark>rse of your l</mark> nd transfers m	otcy, did you sell, trade, or otherw business or financial affairs? nade as security (such as the grant we already listed on this statement.			
Included in the second in the	nsferred in the ordinary cou ude both outright transfers ar not include gifts and transfers No	i <mark>rse of your l</mark> nd transfers m	business or financial affairs? nade as security (such as the granti			
Incli	nsferred in the ordinary cou ude both outright transfers ar not include gifts and transfers	i <mark>rse of your l</mark> nd transfers m	business or financial affairs? nade as security (such as the grant we already listed on this statement.	ing of a security interest or m	ortgage on your pro	perty).
Incli Do i	nsferred in the ordinary cou ude both outright transfers ar not include gifts and transfers No	i <mark>rse of your l</mark> nd transfers m	business or financial affairs? nade as security (such as the granti	ing of a security interest or m Describe any property of or debts paid in exchan	ortgage on your property or payments received ge	Date transfe was made
Incli Do i	nsferred in the ordinary cou ude both outright transfers ar not include gifts and transfers No	i <mark>rse of your l</mark> nd transfers m	business or financial affairs? nade as security (such as the grant) we already listed on this statement. Description and value of property	ing of a security interest or m Describe any property of	ortgage on your property or payments received ge	Date transfe was made
Incli Do i	nsferred in the ordinary cou ude both outright transfers ar not include gifts and transfers No Yes. Fill in the details.	i <mark>rse of your l</mark> nd transfers m	business or financial affairs? nade as security (such as the grant) we already listed on this statement. Description and value of property	ing of a security interest or m Describe any property of or debts paid in exchan	ortgage on your property or payments received ge	Date transfe was made
Incli Do i	nsferred in the ordinary cou ude both outright transfers ar not include gifts and transfers No Yes. Fill in the details. Person Who Received Transfer	i <mark>rse of your l</mark> nd transfers m	business or financial affairs? nade as security (such as the grant) we already listed on this statement. Description and value of property	ing of a security interest or m Describe any property of or debts paid in exchan	ortgage on your property or payments received ge	Date transfe was made
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Incli Do i	nsferred in the ordinary cou ude both outright transfers ar not include gifts and transfers No Yes. Fill in the details. Person Who Received Transfer Number Street City State	irse of your ind transfers in a that you have	business or financial affairs? nade as security (such as the grant) we already listed on this statement. Description and value of property	ing of a security interest or m Describe any property or debts paid in exchan	ortgage on your property or payments received ge	Date transfe was made
Included in the second in the	nsferred in the ordinary cou ude both outright transfers ar not include gifts and transfers No Yes. Fill in the details. Person Who Received Transfer Number Street	irse of your ind transfers in a that you have	business or financial affairs? nade as security (such as the grant) we already listed on this statement. Description and value of property	ing of a security interest or m Describe any property or debts paid in exchan	ortgage on your pro or payments received ge	Date transfe was made
Incli Do i	nsferred in the ordinary cou ude both outright transfers ar not include gifts and transfers No Yes. Fill in the details. Person Who Received Transfer Number Street City State	irse of your ind transfers in a that you have	business or financial affairs? nade as security (such as the grant) we already listed on this statement. Description and value of property	ing of a security interest or m Describe any property or debts paid in exchan	ortgage on your pro or payments received ge	Date transfe was made
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Incli Do i	nsferred in the ordinary coulde both outright transfers are not include gifts and transfers No Yes. Fill in the details. Person Who Received Transfer Number Street City State Person's relationship to you	irse of your ind transfers in a that you have	business or financial affairs? nade as security (such as the grant) we already listed on this statement. Description and value of property	ing of a security interest or m Describe any property or debts paid in exchan	ortgage on your pro or payments received ge	Date transfe was made
included in the second in the	nsferred in the ordinary coulde both outright transfers are not include gifts and transfers No Yes. Fill in the details. Person Who Received Transfer Number Street City State Person's relationship to you	irse of your ind transfers in a that you have	business or financial affairs? nade as security (such as the grant) we already listed on this statement. Description and value of property	ing of a security interest or m Describe any property or debts paid in exchan	ortgage on your pro or payments received ge	Date transfe was made

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Debtor 1	Mario First Name	Middle Name Last Nam	Hammond	Case number (if kn	own)	
19. Wit l	hin 10 years be	fore you filed for bankrupto	ry, did you transfer any proper	rty to a self-settled tru:	st or similar device of v	which you
are	a beneficiary?	(These are often called asse	t-protection devices.)	•		
2	No Yes. Fill in the d	otaile				
_	res. I iii iii die d					
		i	Description and value of the prope	erty transferred		Date transfer was made
	Name					
	Name of trust					
	***************************************					:
Part 8			nstruments, Safe Deposit			
			were any financial accounts o	or instruments held in	your name, or for your	benefit,
		d, or transferred? savings. monev market. or	other financial accounts; certi	ificates of denosit: sha	ares in hanks credit un	ione
bro	kerage houses,	pension funds, cooperativ	es, associations, and other fir	nancial institutions.	aroo in busino, oroug as	nona,
	No Yes. Fill in the (dataila				
	res. Fili ili die i		l act 4 digita of account number	T	B -4	
		'	Last 4 digits of account number	Type of account or instrument	Date account was closed, sold, moved, or transferred	Last balance before closing or transfer
	Name of Financial		xxxx	☐ Checking		s
	Number Street			Savings		
				Money market		
	City	State ZIP Code		☐ Brokerage		
				Other		
			xxxx	Checking		\$
	Name of Financial	nstitution		☐ Savings		-
	Number Street			Money market		
				☐ Brokerage		
	City	State ZIP Code		Other		
1. Do y	ou now have, o	or did you have within 1 yea	ar before you filed for bankrup	tcy, any safe deposit i	oox or other depository	r for
	urities, cash, or	other valuables?			•	
	No Yes. Fill in the d	letails.				
-			Who else had access to it?	Describe the	contents	Do you still have it?
						□ No
	Name of Financial i	nstitution Na	ame			☐ Yes
	Number Street	N	umber Street	WATER THE THE THE STATE OF THE		
						
	City	Ci	ty State ZIP Code			

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Debtor		Middle Name L	Hammond ast Name	Case number (if known)	
22. Ha	ve you stored prope	erty in a storage un	it or place other than your hom	e within 1 year before you filed for bankruptcy?	
-	No Yes. Fill in the deta				
-	res. rill in the deta	NIS.	Marie a de la companya della companya de la companya de la companya della company		
			Who else has or had access to	Dit? Describe the contents	Do you still have it?
	Name of Storage Facili	fh.	Name	· · · · · · · · · · · · · · · · · · ·	□ No
		,	rearite		Yes
	Number Street		Number Street	the state of the s	
	***************************************		City State ZIP Code	The second secon	
	City	State ZIP Code	•		
Part	9: Identify Pr	onarty You Hold	or Control for Someone El		
O:	uoin in finst for son	neone.	someone else owns? Include a	ny property you borrowed from, are storing for,	
*******	No				
السا	Yes. Fill in the deta	iils.	Mari		
			Where is the property?	Describe the property	Value
	Owner's Name				
			Al.,		\$
	Number Street		Number Street		
				The Action is a second property of the Action in the Action is a second property of the Action in the Action is a second property of the Action in the Action is a second property of the Actio	
	City	State ZIP Code	City State	ZIP Code	
Part	10: Give Detail	s About Environ	mental Information		
For the	e purpose of Part 10	the following defi	initions analys		
				n concerning pollution, contamination, releases	
11614	raidods of toxic 200	istances, wastes, o	r material into the air, land, soiling the cleanup of these substa	. SUPPACE Water groundwater or other medium	ot
Site	e means any location	n, facility, or prope		nmental law whether you pay own apprets an	
				azardous waste, hazardous substance, toxic	
sut	stance, hazardous i	material, pollutant,	contaminant, or similar term.	actions waste, nazardous substance, toxic	
Report	all notices, releases	s, and proceedings	that you know about, regardle	ss of when they occurred.	
				lly liable under or in violation of an environment	
		you an	ar you may be hable of potentia	ny nable under or in violation of an environment	al law?
Ø					
4	Yes. Fill in the detail	is.			
			Governmental unit	Environmental law, if you know it	Date of notice
•	Name of site		Governmental unit		·
ī	Number Street		Number Street		
-			City State ZIP Code		
ä	City	State ZIP Code			

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ebtor 1	Mario First Name Middle Name	Hammond Last Name	Case numbe	BF (if known)		
25. Have	you notified any governmental un	it of any release of hazardous mater	ial?			
2						
Q ,	Yes. Fill in the details.					
		Governmental unit	Environmental la	w, if you know it		Date of notice
	Name of site	Governmental unit				
	Number Street	Number Street	.			
		City State ZIP Code	-			
	City State ZIP Code					
Z		administrative proceeding under an	y environmental i	aw? Include set	dements and o	orders.
· ·	es. Fill in the details.	Court or agency	Nature of th	e case		Status of the case
c	ase title					Case
		Court Name				Pending
						On appeal
		Number Street				☐ Concluded
ā	ase number	City State ZIP Coo	 le			
		•	-			
artidi 7. With		Business or Connections to Any ruptcy, did you own a business or ha		owing connection	ons to any bus	iness?
L	A sole proprietor or self-employe	ed in a trade, profession, or other ac	tivity, either full-ti	me or part-time		
Ļ	 A member of a limited liability co A partner in a partnership 	ompany (LLC) or limited liability parti	nership (LLP)			
	A partner in a partnership An officer, director, or managing	executive of a corporation				
		oting or equity securities of a corpora	ation			
	o. None of the above applies. Go to		30011			
) Part 12. fill in the details below for each busi	noce			
_ :	on enough an initial apply about and	Describe the nature of the business		Employer Identif	fication number	
	Business Name			Do not include S		
				CIM:		
i	Number Street		*****************	EIN:	· 	
		Name of accountant or bookkeeper		Dates business	existed	
		naman		From	To	_
'	City State ZIP Code	Describe the nature of the business		er e	B45 4	
ī	Business Name	Describe the nature of the business Employer Identification num Do not include Social Securi			umber or l'TIN.	
;	Number Street			EIN:	-	
	minder Street	Name of accountant or bookkeeper		Dates business	xisted	
				From	То	···

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Describe the nature of the business Describe the nature of the business Employer Identification number Do not include Social Security number Street Name of accountant or bookkeeper Dates business existed To City State ZIP Code R. Within 2 years before you filed for bankruptcy, did you give a financial statement to anyone about your business? Include all institutions, creditors, or other parties.	
Business Name EIN: Number Street Name of accountant or bookkeeper Dates business existed City State ZIP Code Business Name From To Within 2 years before you filed for bankruptcy, did you give a financial statement to anyone about your business? Include all institutions, creditors, or other parties.	
Business Name EIN: Number Street Name of accountant or bookkeeper Dates business existed City State ZIP Code From To Within 2 years before you filed for bankruptcy, did you give a financial statement to anyone about your business? Include all institutions, creditors, or other parties.	
Business Name From To City State Zip Code	
Business Name Find	
Number Street Name of accountant or bookkeeper Dates business existed From To City State ZIP Code Within 2 years before you filed for bankruptcy, did you give a financial statement to anyone about your business? Include all institutions, creditors, or other parties.	
Name of accountant or bookkeeper Dates business existed From To City State ZIP Code Within 2 years before you filed for bankruptcy, did you give a financial statement to anyone about your business? Include all institutions, creditors, or other parties.	
City State ZIP Code From To Within 2 years before you filed for bankruptcy, did you give a financial statement to anyone about your business? Include all institutions, creditors, or other parties.	
City State ZIP Code Within 2 years before you filed for bankruptcy, did you give a financial statement to anyone about your business? include all institutions, creditors, or other parties.	
City State ZIP Code Within 2 years before you filed for bankruptcy, did you give a financial statement to anyone about your business? include all institutions, creditors, or other parties.	
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institutions, creditors, or other parties. No	
institutions, creditors, or other parties.	
institutions, creditors, or other parties. 2 No	
Mo No	financial
 11-	
Yes. Fill in the details below.	
Date issued	
Name MM / DD / YYYY	
Number Street	
City State ZIP Code	
t 12: Sign Below	
t 12: Sign Below	
I have read the answers on this Statement of Financial Affairs and any attachments, and I declare under penalty of perjury the	at the
I have read the answers on this Statement of Financial Affairs and any attachments, and I declare under penalty of perjury the answers are true and correct. I understand that making a false statement, concealing property, or obtaining money or proper	at the ty by fraud
I have read the answers on this Statement of Financial Affairs and any attachments, and I declare under penalty of perjury the answers are true and correct. I understand that making a false statement, concealing property, or obtaining money or proper in connection with a bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, or both.	at the ty by fraud
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I have read the answers on this Statement of Financial Affairs and any attachments, and I declare under penalty of perjury the answers are true and correct. I understand that making a false statement, concealing property, or obtaining money or proper in connection with a bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571. Signature of Debtor 1 Date Did you attach additional pages to Your Statement of Financial Affairs for Individuals Filing for Bankruptcy (Official Form 107).	ty by fraud
I have read the answers on this Statement of Financial Affairs and any attachments, and I declare under penalty of perjury the answers are true and correct. I understand that making a false statement, concealing property, or obtaining money or proper in connection with a bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571. Signature of Debtor 1 Signature of Debtor 2	ty by fraud
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I have read the answers on this Statement of Financial Affairs and any attachments, and I declare under penalty of perjury the answers are true and correct. I understand that making a false statement, concealing property, or obtaining money or proper in connection with a bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571. Signature of Debtor 1 Signature of Debtor 2	ty by fraud
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Official Form 108

Statement of Intention for Individuals Filing Under Chapter 7

If you are an individual filing under chapter 7, you must fill out this form if:

- creditors have claims secured by your property, or
- you have leased personal property and the lease has not expired.

You must file this form with the court within 30 days after you file your bankruptcy petition or by the date set for the meeting of creditors, whichever is earlier, unless the court extends the time for cause. You must also send copies to the creditors and lessors you list on the form.

If two married people are filing together in a joint case, both are equally responsible for supplying correct information. Both debtors must sign and date the form.

Be as complete and accurate as possible. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known).

Part 1:

List Your Creditors Who Have Secured Claims

Identify the creditor and the property that is collateral	What do you intend to do with the property that secures a debt?	Did you claim the property as exempt on Schedule C2	
Creditor's name:	☐ Surrender the property.	™ No	
	Retain the property and redeem it.	☐ Yes	
Description of property securing debt:	Retain the property and enter into a Reaffirmation Agreement.		
•	Retain the property and [explain]: N/A		
Creditor's name:	☐ Surrender the property.	□ No	
	Retain the property and redeem it.	Yes	
Description of property securing debt:	Retain the property and enter into a Reaffirmation Agreement.		
•	Retain the property and [explain]: M/A		
Creditor's	☐ Surrender the property.	□ No	
name:	Retain the property and redeem it.	☐ Yes	
Description of property securing debt:	Retain the property and enter into a Reaffirmation Agreement.		
	Retain the property and [explain]: \sqrt{A}		
Creditor's name:	☐ Surrender the property.	□ No	
	Retain the property and redeem it.	Yes	
Description of property securing debt:	Retain the property and enter into a Reaffirmation Agreement.		
-	\square Retain the property and [explain]: $\frac{N}{A}$		

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Page 54 of 54 Document Hammond Mario Case number (If known) Debtor 1 **List Your Unexpired Personal Property Leases** Part 2: For any unexpired personal property lease that you listed in Schedule G: Executory Contracts and Unexpired Leases (Official Form 106G), fill in the information below. Do not list real estate leases. Unexpired leases are leases that are still in effect; the lease period has not yet ended. You may assume an unexpired personal property lease if the trustee does not assume it. 11 U.S.C. § 365(p)(2). Will the lease be assumed? Describe your unexpired personal property leases ☐ No Lessor's name: Yes Description of leased property: Lessor's name: ☐ No Yes Description of leased property: ☐ No Lessor's name: ☐ Yes Description of leased property: No No Lessor's name: Yes Description of leased property: Lessor's name: ☐ No ☐ Yes Description of leased property: O No Lessor's name: ☐ Yes Description of leased property: ☐ No Lessor's name: ☐ Yes Description of leased property: Part 3: Sign Below Under penalty of perjury, I declare that I have indicated my intention about any property of my estate that secures a debt and any personal property that is subject to an unexpired lease.

* Mario Harmond * Mario Marmond
Signature of Debtor 2

Date 13 13 2014

MM/ DD / YYYY